**Federal Public Servants with Disabilities: Follow Up Survey on Workplace Accommodations**

**Final Report on the October 2019 Follow-Up Survey**

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# Executive summary

## Background and objectives

The Office of Public Service Accessibility (OPSA), Treasury Board of Canada Secretariat (TBS), was created in 2018 to assist departments in preparing for new accessibility requirements under the *Accessible Canada Act* and to develop a public service accessibility strategy to improve accessibility government-wide. Because minimal information existed regarding the efficiency and effectiveness of current workplace accommodation practices, OPSA conducted a Benchmarking Study on Workplace Accommodation Practices in the Federal Public Service, beginning with an online survey conducted in May 2019 to gather factual data from employees and supervisors.

The findings of that research ([Baseline Analysis of the May 2019 Survey on Workplace Accommodations in the Federal Public Service](https://www.canada.ca/en/government/publicservice/wellness-inclusion-diversity-public-service/diversity-inclusion-public-service/accessibility-public-service/baseline-analysis-2019-survey-workplace-accommodations-federal-public-service.html))[[1]](#footnote-2) led to the next phase of the Benchmarking Study: development of in-depth follow-up Public Opinion Research (POR) online surveys, with the objective of obtaining a deeper understanding of the experience of users (employees and supervisors) with existing workplace accommodation practices. This research will be used to guide improvements to the process of obtaining workplace accommodations to enable employees with disabilities to contribute to their full potential. This report summarizes the feedback received from employees and supervisors in response to the follow-up (POR) online surveys. Because the survey was anonymous, however, it is important to note that there is no direct correlation between the individual responses of employees and supervisors.

## Methodology

Environics designed two survey instruments, one for employees who requested an accommodation for themselves in the last three years, and one for supervisors who requested an accommodation for an employee in the last three years. OPSA conducted the online surveys with members of the federal public service between October 22 and 29, 2019. A total of **980** valid surveys were completed: **802** by employees and **178** by supervisors.

There are two important considerations to keep in mind:

* These are non-probability samples of employees and supervisors who participated in the May 2019 survey and asked to be re-contacted for follow-up consultation. As a result, this sample cannot be considered representative of all federal public service employees and supervisors who have experience with workplace accommodations.
* Both surveys employed quantitative, closed-ended questions (presented here in specific proportions and figures), and qualitative, open-ended questions in which respondents could provide any response they wished (where themes and patterns are presented instead of proportions and figures).

## Contract value

The contract value was $74,836.62 (HST included).

## Key findings and observations

The main purpose of these surveys was to deepen the understanding of how federal employees and supervisors view and experience the workplace accommodation request process. This summary presents the key findings about each phase of the process, followed by additional observations specific to the employee and supervisor surveys.

### 1. The accommodation request process

#### Pre-request phase

* Employees consistently associate negative emotions with the period prior to submitting their accommodation request, the most common being fear about how the request will be perceived by supervisors and colleagues. These negative emotions have implications for whether, and when, employees choose to make an accommodation request. Often employees delay their request until they reach a “tipping point” where they can no longer cope, which can have negative health consequences.
* To make their decision to request an accommodation easier, employees want their colleagues to believe and trust they are seeking an accommodation to overcome barriers in the workplace so they can contribute to their fullest potential, and not due to laziness, lack of ability or desire for preferential treatment. Another barrier for employees is a lack of clarity about the process and how to initiate it.
* Supervisors also acknowledge challenges associated with having conversations with employees about workplace accommodations, as well as with the complexity of the process, both of which are compounded by insufficient training and support.

#### Assessment phase

* In the assessment phase, the vast majority (nine in ten) employees were required to provide evidence supporting their need for accommodation. A key challenge for the medical certificate request process is the lack of clarity regarding the information requirements, which often leads to multiple physician visits to acquire the acceptable information. Employee concerns about the formal assessment process include that it is too slow and does not align with the circumstances of the request (for example, the fitness-to-work assessment includes very little about mental health). In both cases, there are concerns about managers who disregard the results.
* For supervisors, a key challenge is that the medical and assessment forms do not generate the intended information about functional limitations necessary to make the decision for or against an accommodation.
* Ultimately, employees feel that a process that requires them to gather medical certificates and/or other evidence signals a lack of trust and support; unless there is a strong, objective reason to question the validity of the request, it should be approved by default. Many supervisors echo this sentiment, especially when it comes to accommodations resulting from an ergonomic assessment.

#### Decision and outcome phase

* Among accommodation requests where the outcome is known, nine in ten are approved and one in ten are denied (excluding cases where the outcome is not known).
* Of approved requests, less than two thirds (64%) are fully in place to date. For employees, the length of time to receive an accommodation is a major issue that can worsen their condition and constrain their ability to contribute fully. This is compounded by delays at every phase of the process, including the length of time to obtain evidence (assessment phase), receive a decision, implement the accommodation, and procure and install necessary equipment. Supervisors also identify the cumbersome nature of the procurement process as a pain point, and the need for a centralized approach to reduce delays.
* While the proportion of accommodation requests in this survey that have been denied is relatively low, it is twice as likely among those with mental health disabilities (21%). Among employees whose request was denied, few say they received enough information to understand the decision; in turn, many feel that negative management perceptions of their condition or disability played a role in the decision. These employees are forced to make a choice about whether to leave their position (or the public service altogether) or continue without accommodation. Supervisors involved in a denied request typically say the reasons are a lack of proof of medical necessity for an accommodation or an inability to provide the accommodation within operational limitations.

#### Overall accommodation process

* Employees who chose to complete this survey express widespread dissatisfaction (58%) with the accommodation process as a whole. Both employees and supervisors responding to the survey find the process complex and challenging to navigate, and would like a simpler, more centralized process led by neutral functional experts. Employees also identify the need for an advocate to help navigate the process and act on their behalf with unsupportive or adversarial managers.
* Another significant barrier is the need for employees to make multiple requests or repeatedly submit medical certificates and/or other evidence for the same accommodation due to a change in their position, physical office or supervisor. Employees and supervisors support the proposed “accommodation passport” program, which would allow the transfer of an approved accommodation to other departments or positions.

### 2. Additional findings from the employee survey

* More than half (54%) of employee requests in this survey involved at least one piece of adaptive technology, and four in ten requested more than one as part of their request.
* Employees’ views about their future in the Government of Canada are connected to their experience with the accommodation process. Career optimism is notably higher among employees with an accommodation fully in place.
* Recent experiences of harassment and discrimination reported by employees who chose to complete this survey are higher than the incidence rate reported in the 2019 Public Service Employee Survey (PSES) by people with disabilities in general. In this survey, harassment and discrimination are more widely reported by those required to provide medical or other evidence and by those whose request was denied, suggesting a possible compounding effect (not necessarily cause and effect). This survey’s results may support the thesis that the higher harassment and discrimination scores reported in the PSES are linked to workplace accommodations.
* Four in ten employees report taking extended sick leave at some point in their career as a result of not being appropriately accommodated. This is particularly common for those facing workplace barriers due to mental health conditions. Almost a quarter (23%) of these employees remain on sick leave for more than six months, and satisfaction with the level of support upon their return is very low (16%).
* There is some evidence that employees with conditions or disabilities that are more readily recognizable to outside observers, such as seeing, hearing and mobility disabilities, tend to have more successful accommodation experiences. Moreover, more than half of supervisors agree that “invisible” conditions make the assessment process more complex.
* Few significant gender-based differences were identified in the research. However, women are somewhat more likely than men to say that chronic pain and sensory or environmental disabilities are the reason for their accommodation request and to describe their condition as episodic or recurring. Possibly as a result, women are more likely to be required to provide a medical certificate or other evidence, to have taken extended sick leave at some point as a result of not being appropriately accommodated, and to have chosen not to request an accommodation in the past.

### 3. Additional findings from the supervisor survey

* Most supervisors feel that they do not have adequate resources to effectively manage accommodation requests, and that the amount of time and effort dedicated to this process is not fully appreciated by senior management. Notably, supervisors often cite the need for more expert advice on workplace accommodations, other than reliance on doctors and specialists. An opportunity may exist to clarify the most effective and helpful source of expertise to support managers in managing requests for accommodations.
* The single most common source of funding for accommodation requests is the budgets of working-level managers. Supervisors have no clear preference regarding the source of funds for accommodation requests. Beyond the source of funding, it is generally recognized that there is a need for better support through the process and greater clarity regarding the process.
* Beyond the funding of accommodations, supervisor suggestions for additional resources or support include a more consistent or centralized accommodation process, step-by-step instructions, and greater access to information and functional experts.
* There is also no consensus on whether the existing performance evaluation system is appropriate for employees for disabilities, but suggestions for improvement include aligning performance objectives with approved accommodations, re-evaluating assessment criteria and assessing performance once the accommodation is in place, and ensuring that evaluators know about previously documented accommodations.

## Political neutrality statement and contact information

I hereby certify as senior officer of Environics that the deliverables fully comply with the Government of Canada political neutrality requirements outlined in the *Policy on Communications and Federal Identity* and the Mandatory Procedures for Public Opinion Research of the *Directive on the Management of Communications*. Specifically, the deliverables do not include information on electoral voting intentions, political party preferences, standings with the electorate, or ratings of the performance of a political party or its leaders.



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# Introduction

## Background

The Office of Public Service Accessibility (OPSA), Treasury Board of Canada Secretariat (TBS), was created in 2018 to assist departments in preparing for new accessibility requirements under the *Accessible Canada Act* and to develop a public service accessibility strategy to improve accessibility government-wide. Because minimal information existed regarding the efficiency and effectiveness of current workplace accommodation practices, OPSA conducted a Benchmarking Study on Workplace Accommodation Practices in the Federal Public Service, beginning with an online survey conducted in May 2019 to gather factual data from employees and supervisors.

The findings of that research ([Baseline Analysis of the May 2019 Survey on Workplace Accommodations in the Federal Public Service](https://www.canada.ca/en/government/publicservice/wellness-inclusion-diversity-public-service/diversity-inclusion-public-service/accessibility-public-service/baseline-analysis-2019-survey-workplace-accommodations-federal-public-service.html))[[2]](#footnote-3) led to the next phase of the Benchmarking Study: development of in-depth follow-up public opinion research (POR) online surveys to obtain a deeper understanding of the experience of users (employees and supervisors) with existing workplace accommodation practices. All participants in the May 2019 online survey were invited to participate in this second, follow-up phase and responded as either an employee or a supervisor.

Two separate online surveys were created for the second phase: one for employees who requested an accommodation for themselves in the last three years, and one for supervisors who requested an accommodation for an employee in the last three years. The online surveys asked different questions about the accommodations process and gathered experiences, opinions and suggestions from both perspectives. Employees and supervisors responded to different questionnaires. Each online survey took respondents roughly 30 minutes to complete. A total of **980** valid surveys were completed between October 22 and 29, 2019: 802 by employees and 178 by supervisors.

Environics designed the survey instrument, and OPSA conducted the online survey with members of the federal public service. The data from each online survey was provided by TBS to Environics Research and was first “scrubbed” by TBS to remove actual or potential identifying information in order to maintain the anonymity of respondents, and then cleaned and coded by Environics to allow for statistical tabulation. Open-ended responses were collected and reviewed by Environics, and the results of all questions were analyzed and are presented in this report.

## Research objectives

The results of this phase of the research will guide improvements to the process of obtaining workplace accommodations to enable employees with disabilities to contribute to their full potential. The specific research objectives of the follow-up second phase were to:

* develop in-depth questionnaires for employees who have made an accommodation request and supervisors who have assisted in providing accommodations
* gain a deeper understanding of users’ experience with existing workplace accommodation practices

## About the report

This report begins with an executive summary that outlines key findings, followed by a detailed analysis of the employee online survey data, the supervisor online survey data, and a summary of key observations and considerations.

### Research considerations

Some important considerations to note about the research are as follows:

* This was a non-probability sample of employees and supervisors who participated in the May 2019 online survey and asked to be contacted for follow-up consultation. It involves only those who self-selected to participate, and it is not possible to determine the motivation for participation and the potential that may exist for a self-selection bias. As a result, it is not a random sample of all public service employees who have made an accommodation request or of supervisors who have managed one in the past three years and cannot be considered representative of these groups.
* Because the survey was anonymous, employees and supervisors are not necessarily referencing the same requests, so there is no direct correlation between the individual responses of employees and supervisors.
* Both the employee and supervisor surveys include quantitative, closed-ended questions with limited choice options presented to respondents as well as broad, open-ended questions in which respondents were allowed to provide any response they wished. Proportions and specific figures are provided in the case of quantitative responses, and findings for the qualitative responses are presented in terms of the most common trends, patterns and themes (that is, exact figures and proportions are not available). This approach is in keeping with industry norms when reporting on exploratory, qualitative research, as it does not limit or attempt to guide the responses that participants provide.

### Report focus

The focus of the online survey was primarily on accommodation requests for a health condition or disability, as opposed to those unrelated to a disability (for example, a family or religious accommodation). In addition, employees were asked to consider a single accommodation (the one that had the greatest impact on them) when answering the online survey questions, whereas supervisors were asked about the accommodation process as a whole rather than focusing on a single accommodation experience.

The findings in the main body of the employee section of the report reflect only those requesting a disability-related accommodation (n=743). In the employee survey, 44 individuals stated explicitly that their request was made for another purpose (such as family or religious reasons). A comparison of the results of those making a disability-related accommodation request to those making another type of request is in [Section 9](#_9._Comparison_of) of this report. A total of 15 employees did not respond to the question about the nature of their request and, therefore, do not fall into either category.

The findings of the supervisor section of the report reflect all cases, including the four cases (2% of all supervisor respondents) who say they have not dealt with a disability-related accommodation in the past three years because, upon closer review of the open-ended responses from these cases, some descriptions of disability-related accommodations were included. For these reasons, all valid supervisor cases are considered together in that section of this report.

Provided under a separate cover is a set of detailed “banner tables” that present the results for all closed-ended questions by the relevant segments for employees and supervisors (including by region, age, gender, first language and other relevant variables). These tables are referenced when presenting findings for individual survey questions as part of the detailed analysis presented in this report.

A detailed description of the methodology for this research is presented in [Appendix A](#Appendix_A). The survey instruments are presented in [Appendix B](#Appendix_B) and [Appendix C](#Appendix_C).

Throughout the report, results are expressed as percentages unless otherwise noted. Where base sizes are reported in tables and charts, they reflect the actual number of respondents who answered the question. Results may not add to 100% due to rounding or multiple responses.

# Employee survey

## 1. Barriers in the workplace

Most respondents made one or two accommodation requests in the past three years. Most of those making an accommodation request have experienced barriers performing tasks and activities in their workplace due to a health condition or disability, the most common being chronic health conditions or chronic pain and mental health issues. Almost all of these primary health conditions are permanent or episodic, and eight in ten respondents describe them as invisible.

### Number of accommodation requests in the last three years

Employees were asked how many separate workplace accommodation requests they had made for themselves in the past three years. Each of the employees responding to this survey had previously participated in the Phase 1 study and therefore it was known that they had made at least one accommodation request. Most employees made one accommodation request per year or fewer, including those who made one (39%), two (27%) or three requests (17%) in the past three years. Less than one in six (15%) made more than three.

**Table 1: number of workplace accommodation requests made by employees**

|  |  |
| --- | --- |
| **Q1. How many separate requests for workplace accommodation have you made for yourself in the past years, for any reason?** | **Total employee sample (n=802)** |
| 1 request | 39% |
| 2 requests | 27% |
| 3 requests | 17% |
| 4 or 5 requests | 9% |
| More than 5 requests | 6% |
| Prefer not to say | 1% |
| Base:all employees  n = number of respondents | |

It is worth noting that some employees reported in the qualitative comments that they were asked to submit their accommodation request multiple times due to a change in physical office location or position, or if their supervisor changed. As a result, it is possible that the proportion of employees making three or more requests to address entirely separate barriers is lower than it appears to be here (however, no such direct question was asked in the survey). There are no differences in the number of requests by demographics, such as gender or age, or by type of health condition or disability.

### Employees experienced barriers in the workplace due to a health condition or disability

Respondents were asked whether they have experienced barriers to performing their work duties due to a health condition or disability. A large majority (84%) say they have experienced such barriers.

**Table 2: employees experienced barriers in the workplace due to health condition or disability**

|  |  |
| --- | --- |
| **Q2. Have you experienced barriers to your ability to perform tasks and activities in the workplace as a result of a chronic health condition or disability?** | **Total employee sample (n=802)** |
| Yes | 84% |
| No | 15% |
| Prefer not to answer | 1% |
| Base:all employees  n = number of respondents | |

The proportion who have experienced barriers is higher among those aged 35 years or older. There are no differences by gender, region or language. Those who have experienced barriers are more likely to have made more than one accommodation request in the past three years.

### Nature of health conditions and disabilities

Employees who experience barriers in their workplace due to a health condition or disability (84% of all respondents) were asked which of nine categories best describes their primary condition or disability (the one that causes them the most difficulty in carrying out work-related tasks). Table 3 lists the nine conditions included in the survey and the descriptions provided to respondents.

**Table 3: description of health conditions and disabilities**

|  |  |
| --- | --- |
| **Condition type** | **Description** |
| **Chronic health condition or pain** | Affects ability to function on a regular or episodic basis due to migraines, Crohn’s disease, colitis, and other disabilities or health conditions. |
| **Mental health issue** | Affects psychology or behaviour, such as anxiety, depression or social / compulsive disorder or phobia or psychiatric illness. |
| **Mobility issue** | Affects ability to move your body, including the required use of a wheelchair or a cane, or other issues impacting your mobility. |
| **Cognitive disability** | Affects ability to carry out tasks involving executive functioning, such as planning and organization, learning information, communication and memory, including autism or Asperger’s syndrome, attention deficit disorder, learning disabilities and speech impediments. |
| **Issues with flexibility or dexterity** | Affects ability to move joints or perform motor tasks, especially with your hands. |
| **Seeing disability** | Affects vision, including total blindness, partial sight and visual distortion. |
| **Hearing disability** | Affects ability to hear, including being hard of hearing, deafness or acoustic distortion. |
| **Sensory / environmental disability** | Affects sensitivity to light, sounds or other distractions, as well as allergens and other environmental sensitivities. |
| **Intellectual disability** | Affects ability to learn and to adapt behaviour to different situations. |

The most widely identified conditions were chronic health conditions or pain (35%), followed by mental health issues (21%). Sensory or environmental disabilities, mobility issues, issues with flexibility or dexterity, and cognitive disabilities are reported by around one in ten respondents each, while seeing and hearing disabilities are less common. An intellectual disability was reported by less than 1% of respondents.

**Table 4: type of primary health condition or disability**

|  |  |
| --- | --- |
| **Q3. Which of the following categories most closely describes the nature of your primary condition or disability, meaning the one that causes you the most difficulty in carrying out tasks and activities in the workplace?** | **Employees who experience barriers due to a condition or disability (n=670)** |
| A chronic health condition or pain | 35% |
| A mental health issue | 21% |
| A sensory / environmental disability | 9% |
| A mobility issue | 9% |
| Issues with flexibility or dexterity | 8% |
| A cognitive disability | 8% |
| A seeing disability | 5% |
| A hearing disability | 3% |
| An intellectual disability | less than 1% |
| I prefer not to answer | 2% |
| Base:employees who face barriers due to health condition or disability  n = number of respondents | |

Chronic health conditions or pain and sensory / environmental disabilities are more widely reported by women, while seeing disabilities are more widely reported by men. There are no differences by age or region.

Employees were asked whether their primary condition or disability is permanent, episodic or temporary. Among respondents who identified their primary condition or disability, two thirds say it is permanent, while the rest describe it as either episodic or recurring (28%) or temporary (5%).

**Table 5: permanence of primary health condition or disability**

|  |  |
| --- | --- |
| **Q4. Is your primary chronic health condition, pain, environmental sensitivity or other disability temporary, episodic or permanent?** | **Employees with an identified condition or disability (n=658)** |
| Permanent | 66% |
| Episodic (recurring) | 28% |
| Temporary | 5% |
| I prefer not to answer | 1% |
| Base:employees with a condition or disability identified in the survey  n = number of respondents | |

Respondents were also asked whether they would describe their condition as “visible,” meaning that someone interacting with them would in most cases be aware of it, or “invisible,” where, in most cases, they would not be. A large majority (86%) say their primary condition is invisible to others, including individuals from all categories of health condition or disability.

**Table 6: visibility of primary health condition or disability**

|  |  |
| --- | --- |
| **Q5. Would you describe your primary chronic health condition, pain, environmental sensitivity or other disability as being…?** | **Employees with an identified condition or disability (n=658)** |
| Invisible | 86% |
| Visible | 13% |
| I prefer not to answer | less than 1% |
| Base:employees with a condition / disability identified in the survey  n = number of respondents | |

Half or more of respondents with each type of health condition or disability consider their condition permanent, ranging from exactly half of those with mental health issues to all of those with a hearing disability. A majority of all respondents consider their condition or disability to be invisible within every single type of health condition or disability, ranging from virtually all of those with mental health and cognitive disabilities to just over half of those with mobility issues.

**Table 7: permanence and visibility, by type of primary health condition or disability**

|  |  |  |
| --- | --- | --- |
| **Summary by employee health condition or disability type** | **Health condition is permanent** | **Health condition is invisible** |
| Hearing disability (n=17)\* | 100% | 76% |
| Seeing disability (n=35) | 94% | 63% |
| Cognitive disability (n=53) | 91% | 96% |
| Mobility issue (n=59) | 75% | 54% |
| Sensory / environmental disability (n=61) | 75% | 89% |
| Chronic health condition or pain (n=237) | 60% | 92% |
| Issues with flexibility or dexterity (n=56) | 54% | 75% |
| Mental health issue (n=139) | 50% | 97% |
| Base:employees with a condition / disability identified in the survey  \* = small sample size; use caution when interpreting results  n = number of respondents | |  |

## 2. Accommodation request specifics

Almost all respondents’ accommodation requests were made to address barriers related to a health condition or disability; only one in 20 was for a different reason. Just over half of all accommodation requests involved adaptive technology, with a third requesting three or more different types of adaptive technology within their request.

### Reason for the accommodation request

For the remainder of the survey, respondents were asked to consider one specific accommodation request (the most important or impactful for them) when answering the questions.

In the great majority of requests (84%), employees requested an accommodation to address barriers related to their primary health condition or disability, while one in ten (9%) made the request to address barriers related to a different condition or disability. Therefore, almost all (93%) requests were related to barriers regarding a health condition or disability of some type, and only 5% were for other purposes (such as family or religious reasons).

**Table 8: main reason for the accommodation request**

|  |  |
| --- | --- |
| **Q7. Which of the following best describes the main reason for the accommodation request?** | **Total employee sample (n=802)** |
| To address barriers in the workplace related to your **primary condition or disability** | 84% |
| To address barriers in the workplace related to **another condition or disability** | 9% |
| For another purpose, such as for family or religious reasons | 5% |
| I prefer not to answer | 2% |
| Base:all employees  n = number of respondents | |

Because the primary focus of this research is the accommodation process for those with a health condition or disability, the remainder of the employee section of this report focuses solely on respondents who made a request involving a health condition or disability. Those who made a request for other reasons are examined in [Section 9](#_9._Comparison_of), which explores the nature of these requests and compares them with requests involving a health condition or disability.

### Condition or disability related to accommodation request

Table 9 summarizes the types of health conditions or disabilities that led to the requests that respondents said were most important or impactful for them and were the focus of the rest of the survey. For most respondents, health condition or disability reflects their primary health condition but, as discussed above, a small proportion described a request made for another condition or disability. Overall, across both groups, chronic health conditions and pain most commonly led to the accommodation request (36%), followed by mental health issues (19%).

**Table 9: health condition or disability that led to accommodation request**

|  |  |  |  |
| --- | --- | --- | --- |
| **Q3/Q8. Which of the following categories most closely describes the nature of your primary condition or disability / other condition or disability that led to your accommodation request?** | **Total** | **Request related to primary condition** | **Request related to another condition** |
| A chronic health condition or pain | 36% | 36% | 28% |
| A mental health issue | 19% | 19% | 18% |
| A mobility issue | 10% | 9% | 18% |
| Issues with flexibility or dexterity | 9% | 9% | 10% |
| A sensory or environmental disability | 9% | 9% | 6% |
| A cognitive disability | 7% | 8% | 6% |
| A seeing disability | 5% | 6% | 3% |
| A hearing disability | 3% | 2% | 7% |
| I prefer not to answer | 3% | 2% | 4% |
| Base: made an accommodation request related to a health condition or disability and details of condition / disability are known, n=670  n = number of respondents | | | |

Given differences in the types of barriers experienced by employees with each type of health condition or disability, the summarized results for many of the questions in this report include a split between these groupings. However, given the small number of respondents who said that they had an intellectual disability, results for this grouping are not shown separately in order to maintain the anonymity of respondents.

Table 10 summarizes results about the permanence of the condition or disability that led to the accommodation request. Just under two thirds (63%) of respondents say the condition or disability for which they sought accommodation is permanent, and just over a quarter (28%) say it is episodic or recurring.

**Table 10: permanence of health condition or disability that led to accommodation request**

|  |  |  |  |
| --- | --- | --- | --- |
| **Q4/Q9. Is (or was) your primary chronic health condition, pain, environmental sensitivity or other disability / temporary, episodic or permanent?** | **Total** | **Request related to primary condition** | **Request related to another condition** |
| Permanent | 63% | 64% | 54% |
| Episodic (recurring) | 28% | 27% | 31% |
| Temporary | 6% | 5% | 11% |
| I prefer not to answer | 4% | 4% | 4% |
| Base: made an accommodation request related to a health condition or disability and details of condition / disability are known, n=670  n = number of respondents | | | |

### Adaptive technology in accommodation requests

Respondents were asked whether their accommodation request included any adaptive devices, software or equipment and, if so, what types. A majority (54%) of requests related to a health condition or disability involve adaptive devices, equipment, software or accessories. Overall, around one quarter involved a specialized desk or adaptation to an existing desk or cubicle (27%) or a specialized chair or adaptation to an existing chair (25%).

**Table 11: adaptive technology as part of accommodation request**

|  |  |
| --- | --- |
| **Q11. Did your accommodation request include any adaptive devices, equipment, software or accessories?**  **Q12. Please select which adaptive devices, equipment, software or accessories (IT-related or non-IT-related) were part of your accommodation request.** | **Accommodation request related to a condition or disability (n=743)** |
| **Yes, request included adaptive device, equipment, software or accessory** | **54%** |
| Specialized desk or adaptation to existing desk or cubicle | 27% |
| Specialized chair or adaptation to existing chair | 25% |
| Adapted mouse | 19% |
| Adapted keyboard | 18% |
| Wrist or foot rest | 15% |
| Phone headset | 10% |
| Adjusted lighting | 7% |
| Changes to physical workspace to reduce auditory distractions | 7% |
| Large / specialized computer screen | 6% |
| Noise-cancelling headphones | 6% |
| Screen- or document-reading software | 6% |
| Changes to physical workspace to reduce visual distractions | 5% |
| Speech recognition software | 5% |
| Non-standard laptop | 4% |
| Air purification / filter | 2% |
| Other | 16% |
| **No, request did not include adaptive device, equipment, software or accessory** | **46%** |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |

Overall, four in ten respondents (42%) requested more than one piece of adaptive technology as part of their request.

**Table 12: number of different adaptive technologies requested**

|  |  |
| --- | --- |
| **Q11. Did your accommodation request include any adaptive devices, equipment, software or accessories?**  **Q12. Please select which adaptive devices, equipment, software or accessories (IT-related or non-IT-related) were part of your accommodation request.** | **Accommodation request related to a condition or disability (n=743)** |
| **Yes, request included adaptive device, equipment, software or accessory** | **54%** |
| One piece | 12% |
| Two pieces | 10% |
| Three pieces | 9% |
| Four pieces | 9% |
| Five pieces | 7% |
| Six or more pieces | 7% |
| **No, request did not include adaptive device, equipment, software or accessory** | **46%** |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |

The inclusion of adaptive technology in accommodation requests varies according to the type of health condition or disability that led to the request. Adaptive technology is very commonly a part of requests related to flexibility or dexterity issues, and hearing and seeing disabilities. They are less likely to be part of requests related to sensory / environmental disabilities or mental health issues.

**Table 13: adaptive technology as part of accommodation request, by health condition or disability type**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Accommodation request includes adaptive technologies** |
| Issues with flexibility or dexterity (n=59) | 83% |
| Hearing disability (n=19)\* | 79% |
| Seeing disability (n=35) | 77% |
| Mobility issue (n=65) | 66% |
| Chronic health condition or pain (n=238) | 62% |
| Cognitive disability (n=50) | 44% |
| Sensory / environmental disability (n=58) | 34% |
| Mental health issue (n=128) | 22% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

## 3. Pre-request phase

Prior to making an accommodation request (pre-request phase), many employees report feeling fear and anxiety about making the request due to concerns that making it will lead to negative repercussions with their manager or co-workers. The request is made because they can no longer cope with the current situation, or because of a change in environment or conditions, but employees often report facing unsupportive managers who lack understanding and knowledge about the process. A majority say that it is difficult for employees to find out how to initiate the accommodation process; this situation is especially common among those with an invisible condition and those with cognitive disabilities.

### What led to the decision to make a request?

Respondents were asked to consider each part of the accommodation process separately, beginning with the pre-request phase. This was described as covering the time when they were deciding whether to request an accommodation, up to and including the point at which they presented the request to their supervisor. To capture detailed information, a series of open-ended questions were asked to probe their feelings and thought process, their main concerns and challenges, and suggestions for improving the process at each stage. The major themes in the responses to each question are presented below.

#### Q13. What ultimately led to your decision to request a workplace accommodation (as opposed to continuing with the status quo)?

|  |  |
| --- | --- |
| **Theme** | **No longer able to cope / barriers affecting ability to carry out job-related duties** |
| **Description** | Some employees describe reaching a tipping point, usually after a long period of avoiding making a request. Usually this point was reached when the barriers became too much to handle and/or were affecting their ability to carry out their job-related duties. They often cite a fear of being fired or facing other negative professional consequences due to being unable to perform fully without the required accommodation. |
| **Example quotes** | * “My health was declining, and not being accommodated would have resulted in a reduction of my workweek hours.” * “Working under my regular conditions was unbearable.” * “Frustration with not being to understand or hear what people were saying in person, in meetings and on the phone.” * “(I was) unable to perform duties related to position anymore without accommodation.” * “My disability impacted the speed at which I can process files in an hour. I knew if I did not make the request, I would … not be given another contract, as my ability to make the expected production is impacted by my disability.” |

|  |  |
| --- | --- |
| **Theme** | **Accommodation was required or recommended by a health professional or specialist** |
| **Description** | In some cases, the accommodation was either required or recommended by a health care professional or other specialist, often resulting from an ergonomic assessment or as part of an ongoing treatment plan. |
| **Example quotes** | * “Doctor strongly recommended I find a job where sitting is not a prerequisite or find a way to adopt a physically acceptable alternative.” * “My doctor told me to. No point going to a medical professional if you don’t listen to them.” |

|  |  |
| --- | --- |
| **Theme** | **Change in** **work environment or situation** |
| **Description** | Another trigger is a change in the environment that introduces or exacerbates an existing condition. Such changes include office moves or changes to a workspace that necessitate an accommodation, a change in work status or the need to replace equipment. |
| **Example quotes** | * “My group and I moved upstairs. Above my new desk was a light. From the moment of our move, my migraines that were up to then under control have returned intensely every day.” * “We changed offices, and the new space didn’t have the accommodation.” * “My old ergonomic mouse no longer worked properly, and I needed one still.” |

|  |  |
| --- | --- |
| **Theme** | **Getting an accommodation to avoid going on sick leave** |
| **Description** | Some employees describe deciding to request an accommodation as an alternative to going on sick leave. They feel that the status quo would have required them to stop working to recover, and they express a preference for continuing to work rather than going on leave. |
| **Example quotes** | * “To enable me to keep working rather than going on disability or stress leave.” * “Because I wanted to be able to stay in [the] office and not be on sick leave. I knew that I could do my work simply by changing the posture.” |

|  |  |
| --- | --- |
| **Theme** | **Sudden change in health** |
| **Description** | For some the catalyst is a single event (such as an accident or surgery) or a rapid acceleration of symptoms and/or barriers that had previously been manageable. |
| **Example quotes** | * “Rapid acceleration of symptoms, i.e., though I had previously only had minor pain issues, I woke up one morning unable to lift my head or use a mouse.” * “Sudden change in health and need to be accommodated upon return to work as a result of injuries.” |

|  |  |
| --- | --- |
| **Theme** | **Pressure from management** |
| **Description** | In some instances, employees feel pressure from their managers to perform certain tasks that they find difficult due to their condition or disability. An accommodation may be sought as a way of formalizing a current arrangement or because of medical advice that was not already part of a formal accommodation request. |
| **Example quotes** | * “My current boss was not understanding of my limitations with focusing and attention. I felt I had no alternative but to inform them or else they would have reprimanded me. Their demands were unrealistic of me.” * “Harassment and relentless pressure from the new management to violate my medical note.” * “Pressure from the supervisor at the time that was significant in relation to performance and training to learn new systems.” |

**Q14. What were the 1 or 2 main challenges or concerns you had, if any, when deciding whether to request an accommodation?**

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| --- | --- |
| **Theme** | **Worried about negative perceptions among peers** |
| **Description** | Some employees expressed concerns about how the request may change how others view them: as “high maintenance,” a troublemaker, not being a team player or overly dramatic. Such situations are often mentioned in cases of conditions that others may be unaware of (invisible), especially in the case of mental health issues. |
| **Example quotes** | * “I was very concerned about how I would be perceived and treated by my colleagues. This is still an issue.” * “No. 1 concern: to be perceived as weak, needy and unable to fulfill my job duties.” * “Did not want to be seen as ‘needy’ or ‘high maintenance.’” * “I didn’t want to come across as difficult.” |

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| **Theme** | **Fear of reprisal or damage to career prospects** |
| **Description** | Some employees mention fear of reprisal from managers, such as harassment and bullying, as well as gaining a reputation that would damage their career prospects or lead to being transferred or fired. |
| **Example quotes** | * “Whether there would be retribution for my accommodations, or I’d be seen as unable to do my job.” * “The repercussions from management. Unfortunately, there is a history of employees being harassed and bullied once management is aware that an employee has medical issues in this office.” |

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| **Theme** | **Unsupportive or unresponsive management** |
| **Description** | Some employees report a lack of support or response from managers about the need for accommodation and the feeling of not being taken seriously. There is a sense that managers need to be convinced that the accommodation is necessary and that managers are not genuinely working in the employee’s interests. |
| **Example quotes** | * “Management is unresponsive / disrespectful of the reasons why I asked for remote work.” * “Not being taken seriously by management. I feel as though if I had a visible injury this would have been different.” |

|  |  |
| --- | --- |
| **Theme** | **Lack of knowledge and experience with the process** |
| **Description** | Some employees reference their own lack of knowledge about the accommodation process or that of their manager, including not knowing where or how to start the process or who to contact for assistance or services, and they generally see the process as daunting and complicated. |
| **Example quotes** | * “Who to ask! There are a number of offices both within and outside of my department who have the word ‘accommodations’ in their name. It is not clear who can offer what services.” * “There was no established process that was understood by all on how to make the request.” * “General incompetence and knowledge on how to handle it on the part of management. There is no person to turn to as an employee as to how or with whom do you make a request. There is a form for everything except requesting accommodations!” |

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| **Theme** | **Navigating the process and delays** |
| **Description** | A common challenge is navigating a time-consuming process that includes going to appointments with doctors or specialists, filling in paperwork, and the need to repeatedly explain their condition. Many specifically reference long wait times to obtain an accommodation. |
| **Example quotes** | * “The difficulty of the process itself, having to explain my needs and justifying them.” * “The delays in addressing the requests. My previous request took over 6 months to address.” * “Just the wait time and folks not understanding where to seek approval for my requests.” * “Yes, a lot of extra medical appointments, medical evidence.” |

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| **Theme** | **Concerns about privacy and confidentiality** |
| **Description** | Another concern is that private information provided to managers, supervisors and others involved in the accommodation process would then be shared with others. |
| **Example quotes** | * “I was concerned about others finding out since I am a private person and our office is a pretty hostile environment (i.e., a lot of gossip).” * “I was also concerned with the lack of privacy of my medical condition with the change in workspace (people would ask questions), and I was concerned that my manager may disclose information about me.” * “Concern that my request and private matters would be discussed, not only amongst a group larger than required, but also in front of administrative staff.” |

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| --- | --- |
| **Theme** | **Cost of the accommodation to employer** |
| **Description** | Some employees mention concerns that the cost of their accommodation would be high and whether there would be budget available to implement it. |
| **Example quotes** | * “Our management team were just hamstrung by departmental policy on how much individual cubes could cost.” * “The concern I had was whether there was enough in the budget to accommodate these requests and the time it would take to get them implemented.” |

**Q15. What 1 or 2 things, if any, would have made it easier for you to decide to request an accommodation?**

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| --- | --- |
| **Theme** | **More supportive and open attitude from managers** |
| **Description** | Managers displaying more empathy when requests are made, supporting employees more by working with them instead of against them, and being generally more open and accepting about disabilities. Such support includes assurances that they will not face retribution as the result of a request. |
| **Example quotes** | * “Genuine management support and understanding as well as care for me as a person trying to survive the odds of moving to stage 4 cancer.” * “A manager who is more accepting of disabilities.” * “Having people in position in the Accommodations department who actually care about the employees and are interested in finding solutions, instead of believing that their mandate is to categorically deny any and all accommodations in order to discourage others.” * “If I knew it wasn’t going to somehow be held against me at a later point, whether officially or unofficially. Accommodation requests are negatively perceived, whether or not superiors admit or acknowledge it.” |

|  |  |
| --- | --- |
| **Theme** | **Clearer and simpler process for making requests** |
| **Description** | Clear communication about how the process works and the steps that must be taken, along with a less convoluted and time-consuming process. Some suggest a single standardized form to fill out to begin the process and a website or information line with clear information and instructions. |
| **Example quotes** | * “Clear instructions as to how the process unfolds.” * “Clear, communicated process for requesting workplace accommodation.” * “If there had been clearer information available about the process and steps to request the accommodation, it may not have seemed so daunting.” * “A more expeditious, clear-cut, less convoluted process that gets the employee back to work and being productive. Management needs to stop thinking they are doctors and second-guessing what is presented to them.” |

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| --- | --- |
| **Theme** | **More training for managers about accommodation requests** |
| **Description** | Some employees feel that their manager is not experienced or knowledgeable enough about the process and/or do not know enough about workplace accommodation. They describe problems at the early stages of the request process as being easily avoidable if their manager had been more familiar with the process. |
| **Example quotes** | * “If my superiors had actually received any training with workplace accommodation. They had zero knowledge.” * “Management not understanding their role, how they can support and just plain not understanding me.” * “Maybe if the middle managers had more training it would not have been so difficult getting it past my manager.” |

|  |  |
| --- | --- |
| **Theme** | **Including impartial and specialized people in the process** |
| **Description** | Including a knowledgeable, impartial and arms-length person (possibly substituting them for their direct manager) in the process. This is suggested for multiple reasons: managers are not knowledgeable enough about the accommodation process, protection of personal health information, concerns that managers and Labour Relations work only in management’s interest, and avoidance of potential harassment. |
| **Example quotes** | * “A Duty to Accommodate Coordinator who assisted employees during this time and not just someone who worked for management.” * “Not involving Labour Relations if I am not ‘trouble.’” * “Sending the request to a generic mailbox and not having to discuss my physical health with my supervisors.” * “Having accommodations requests filtered through someone **other** than my direct supervisors, who then used those requests as a reason to withhold work, bully, belittle and threaten me.” |

**Q16. What were the 1 or 2 main thoughts or feelings you had during the time before you presented your request for accommodation?**

|  |  |
| --- | --- |
| **Theme** | **Stress, fear and/or anxiety** |
| **Description** | These emotions were often mentioned together and were associated with specific things: that making the accommodation request would result in negative repercussions, that the accommodation would be denied, that other people would form negative opinions about them, or that they would not be allowed to do certain tasks or would be transferred. Many also describe the process itself as being stressful. |
| **Example quotes** | * “Extreme distress and anxiety at the thought of taking a risk and being dismissed, or taking a risk and either being rejected, or at nothing changing for the better. Questioning whether or not it was worth the risk to make myself vulnerable once again in order to attempt to reduce barriers.” * “Anxiety about presenting the request. Fear of the possible denial of the request, and the resulting impact of a denial of the request.” * “I was worried that it would take a long time to have the assessment done and worried about judgment from colleagues.” |

|  |  |
| --- | --- |
| **Theme** | **Frustration** |
| **Description** | This is mentioned by some employees because they find the process cumbersome when they feel that it should be straightforward, because they are not able to contribute without the accommodation, and because they feel that decision-makers are not taking their concern seriously. |
| **Example quotes** | * “Fear of retribution and frustration that I worked in a situation where my management could not be trusted and there was nothing I could do.” * “I was exhausted and defeated before I began the official process as I was fighting an uphill battle, was given incorrect [information], which I discovered on my own, my management team was 100% inexperienced in accommodations. I was bullied and betrayed.” * “I was frustrated that such an easy solution was being dismissed as impossible to action.” * “My main thought was getting to the point of ‘why bother,’ I won’t get what I need.” |

|  |  |
| --- | --- |
| **Theme** | **Devalued or unimportant** |
| **Description** | Some employees report feeling devalued by the process, that no one cares about their condition or situation, or that they are not important enough to receive accommodation. |
| **Example quotes** | * “In 30 years of employment I had never felt so valueless. But it came down to asking for accommodation or leaving the public service.” * “Main thought: No one understands / cares how badly this affects me.” * “I felt like I am not important, and they don’t understand what a reaction does to one’s body and how each time I have a reaction it is becoming more severe.” * “I would never be able to function independently and live a fulfilling life, as I was being treated as subhuman, treated with no dignity and respect.” * “I kept wondering why I wasn’t normal. I felt like a burden to my director and manager.” |

|  |  |
| --- | --- |
| **Theme** | **Embarrassment, guilt and doubt** |
| **Description** | These emotions come from the feeling of being a burden to their team or that they are letting down their team or manager, concerns that they haven’t exhausted all other options, and stigma resulting from their condition or disability. |
| **Example quotes** | * “Guilt for affecting my co-workers, feelings of being a burden.” * “I don’t want to be a burden on my team or management, but I’m in pain and have to deal with this somehow.” * “Strong sense that I was letting my group down and not pulling my weight.” * “Do I really need to ask for help, is it that bad? Why can’t I make this work as it is right now? What else can I try on my own first?” |

**Ease of finding out how to initiate the accommodation process**

Views are divided about how easy or difficult it is for employees to find out how to initiate the accommodation process. Less than half (46%) of respondents say it is easy; the majority (53%) say it is difficult, including more than a quarter (27%) who say it is very difficult.

**Table 14: ease of finding out how to initiate the accommodation process**

|  |  |
| --- | --- |
| **Q17. How easy or difficult was it to find out how to initiate the accommodation process?** | **Accommodation request related to a condition or disability (n=743)** |
| Very easy | 17% |
| Somewhat easy | 28% |
| Somewhat difficult | 26% |
| Very difficult | 27% |
| I prefer not to answer | 1% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |

Views about the ease or difficulty of initiating an accommodation request do not vary significantly by age, gender or region. However, the view that it is difficult to find out how to initiate a request is higher among those with an invisible condition (57%, as compared to 45% with a visible condition).

There is a notable difference in perceptions depending on the type of condition or disability that led to the accommodation request. The view that it is difficult to find out how to initiate the process is most common among those with a cognitive disability and least widespread among those with mobility issues.

**Table 15: ease of finding out how to initiate the accommodation process, by condition or disability type**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Very or somewhat difficult to find out how to initiate the process** |
| Cognitive disability (n=50) | 68% |
| Seeing disability (n=35) | 63% |
| Issues with flexibility or dexterity (n=59) | 61% |
| Mental health issue (n=128) | 58% |
| Chronic health condition or pain (n=238) | 57% |
| Sensory / environmental disability (n=58) | 52% |
| Hearing disability (n=19)\* | 47% |
| Mobility issue (n=65) | 29% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

## 4. Assessment phase

The vast majority of respondents are required to provide evidence supporting their need for accommodation, predominantly either a medical certificate or a formal assessment. The qualitative comments indicate that the assessment phase is often seen as unnecessary, confusing and time-consuming due to poorly defined information requests leading to multiple visits to doctors or specialists. Other major concerns include the length of time to get an assessment, and managers or supervisors who subsequently ignore the medical advice. Employees feel that they should be more trusted and that managers should have a more understanding attitude toward accommodations.

### Medical certificates or other evidence

The assessment phase covers the time from when employees present their request through all the paperwork, testing or assessments required. This phase focuses on medical or other evidence that, from the respondents’ perspective, may or may not be required. It does not include the decision or outcome of the process, which is covered in the next section.

A very high proportion of respondents (four in five) making a request related to a health condition or disability were required to provide a medical certificate (or other evidence) to support their request.

**Table 16: required to get a medical certificate and/or other evidence**

|  |  |
| --- | --- |
| **Q18. Were you required to provide a medical certificate or other evidence to support the accommodation request?** | **Accommodation request related to a condition or disability (n=743)** |
| Yes | 79% |
| No | 19% |
| I prefer not to answer | 1% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |

The proportion required to provide medical certificates and/or other evidence to support their request does not vary by demographics, and thus applied to the large majority of both men and women, and employees from every region and age group. There was also no variation by permanent, episodic or temporary condition or disability.

However, the proportion required to provide medical certificates and/or other evidence is significantly higher among respondents making a request for an invisible condition or disability (83% as compared to 67% for visible). Three quarters or more of employees were asked to provide medical certificates and/or other evidence regardless of the type of health issue or disability; the exception is seeing issues, where just over half (54%) were required to provide evidence.

**Table 17: required to provide medical certificate or other evidence, by health condition or disability type**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Were required to get a medical certificate or other evidence** |
| Chronic health condition or pain (n=238) | 87% |
| Issues with flexibility or dexterity (n=59) | 83% |
| Mental health issue (n=128) | 82% |
| Cognitive disability (n=50) | 82% |
| Hearing disability (n=19)\* | 79% |
| Sensory / environmental disability (n=58) | 78% |
| Mobility issue (n=65) | 74% |
| Seeing disability (n=35) | 54% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

### Ways to improve the medical certificate request process

#### Q19. What 1 or 2 things, if any, could be improved about the medical certificate request process?

|  |  |
| --- | --- |
| **Theme** | **Clarify requirements for certification** |
| **Description** | Some employees report that there is a lack of clarity about the information that medical professionals are being requested to provide, often resulting in the need to make multiple trips in order to provide the correct evidence. Some suggested more precise information requests or forms for doctors to complete or an online system that could help avoid this problem. |
| **Example quotes** | * “The document should have been simpler and related to my specific needs. My doctor stated that he was confused by it all and did not want to create a situation.” * “More information about what the medical certificate needed to say. Doctors are reluctant to share more information than necessary due to patient confidentiality but wish to only provide the exact information required. I was stuck in the middle trying to explain a process that I didn’t really understand.” * “Perhaps the medical certificate request process could be improved by simplifying the response process. For example, perhaps there could be online forms with drop-down menus to make it more straightforward / faster to complete the medical certificate request process. Employees could have a saved accommodation profile that could be updated or revised as needed rather than gathering information multiple times.” |

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| --- | --- |
| **Theme** | **Managers need to stop ignoring or doubting medical advice** |
| **Description** | Numerous examples were provided of managers doubting or rejecting the advice of medical professionals and specialists when it is provided. Affected employees suggest that managers not attempt to override the medical advice provided by experts. |
| **Example quotes** | * “Some things asked were not within the scope of policy. One manager even wrote to my doctor stating (they) didn’t believe my doctor.” * “Medical notes were not acceptable. My physician specifically indicated modifications that I require. However, work still required a further assessment of limitations.” * “Allow the medical profession to make the diagnosis and determine what accommodations are appropriate. Stop overriding the medical decision.” * “The questioning of medical doctors’ comments by management was an ongoing issue.” |

|  |  |
| --- | --- |
| **Theme** | **Certificates should not always be required** |
| **Description** | Some employees feel that medical certificates should not be required in the case of ergonomic accommodations or permanent or chronic conditions. Some also state that, in most cases, a certificate should not be necessary at all, and employees should be trusted to express their own needs. |
| **Example quotes** | * “When an ergonomic assessment identifies a need, please do not require a medical certificate in addition to that. If that will be the case, then just have a medical professional come into the workspace to make the assessment in person and prevent the added step / lost production time.” * “Since my visual impairment is permanent, my records should remain on file and I should not have to continue to provide these documents each time I make a request.” * “I don’t think a medical certificate should be required to accommodate a person in the workplace. It undermines a person’s ability to manage his / her own disability. I have been disabled my whole life. I am more than competent to express my needs in the workplace, and I would appreciate being given the opportunity to do so.” |

|  |  |
| --- | --- |
| **Theme** | **Certificates are expensive and time-consuming** |
| **Description** | The cost of paying for certificates and other medical evidence is commonly raised, along with how time-consuming it is to attend multiple appointments. It is often necessary for employees to take time off work (or use sick days) to go to the appointments. |
| **Example quotes** | * “It costs money out of pocket to pay for medical documents, as it is not covered under Canada’s Medicare program; [there is also a] lack of reimbursement from [the] employer.” * “Being given time off work to go to the medical appointment. Not having to pay for the note that is being asked for.” * “More time – lack of doctors means exceptional wait times for an appointment.” |

### Formal assessments

A large proportion of respondents were required to participate in some type of formal assessment. Seven in ten say they had to undergo some sort of assessment, such as an ergonomic assessment (42% of all respondents), a fitness-to-work assessment (34%) or some other type of assessment, for example, neuropsychological or psychological assessment, independent medical examination and other assessments by a family doctor (19%).

**Table 18: required to participate in a formal assessment**

|  |  |
| --- | --- |
| **Q20. Were you required to participate in any of the following types of formal assessments by a medical doctor or specialist?** | **Accommodation request related to a condition or disability (n=743)** |
| **Net: yes to any** | **70%** |
| Ergonomic assessment | 42% |
| Fitness-to-work assessment | 34% |
| Another type of formal assessment | 19% |
| **No, none of the above** | **28%** |
| **I prefer not to say** | **2%** |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |

The requirement to participate in a formal assessment does not vary by demographics (age, gender) or region. A formal assessment is more widely reported by those with an invisible (72%) as compared to a visible (62%) condition or disability. Further, looking at the results by condition or disability type reveals that majorities of two thirds or more of each group were required to get an assessment, except those with a sensory or environmental disability and those with a hearing or seeing disability (where around half required an assessment).

**Table 19: required to participate in a formal assessment, by health condition or disability**

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| **Summary by employee health condition or disability type** | **Were required to participate in a formal assessment** |
| Issues with flexibility or dexterity (n=59) | 85% |
| Mobility issue (n=65) | 77% |
| Chronic health condition or pain (n=238) | 75% |
| Cognitive disability (n=50) | 74% |
| Mental health issue (n=128) | 68% |
| Seeing disability (n=35) | 49% |
| Sensory / environmental disability (n=58) | 48% |
| Hearing disability (n=19)\* | 47% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

Taking into account requirements for a medical certificate or for some sort of formal assessment, overall, an overwhelming majority of nine in ten (89%) respondents who have made a disability-related accommodation request were required to provide evidence of some kind.

### Ways to improve the formal assessment request process

#### Q21. What 1 or 2 things, if any, could be improved about the formal assessment process?

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| **Theme** | **Process was too lengthy** |
| **Description** | A common suggestion for improving the formal assessment phase was to have the evaluations done more quickly. The delay in this step of the accommodation process increases the length of time to get an approval and further extends the length of the overall process. |
| **Example quotes** | * “Increase timeliness of delivery. Too slow!” * “In my case, it took 2 years to get the result of the official evaluation; I find it too long. It creates unnecessary stress.” * “Completed in a timely manner, not 6 months or years after the request. The employer needs to realize that when accommodations are requested, there is a reason. The person who needs them is impacted daily until they are implemented, and this can cause their condition to worsen, as was the case with my experience.” |

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| **Theme** | **A streamlined process using trained specialists** |
| **Description** | It is also commonly suggested that the assessment process be handled by dedicated, impartial and specialized staff. This is due to respondents’ perception of the lack of knowledge and experience among managers, privacy protection concerns, the slow process for approval of accommodation requests, and lack of consistency in such approvals across departments of the public service. Further, Labour Relations is sometimes seen by employees as acting only in management’s interest. |
| **Example quotes** | * “Having unbiased and fair supervisors and directors who show understanding, and compassionate supervisors and directors.” * “The process needs to be streamlined with experienced and/or well-trained staff in place, and it needs to be more consistent. Each section / department / building seems to have their own way of dealing with things.” * “Take the process out of the regional management’s hands right from the moment the person asks for a duty to accommodate. The process should not be done by a direct manager with no true medical knowledge that allows them to reject what a doctor has stated in a medical report.” |

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| **Theme** | **Information requirements should be appropriate to the situation** |
| **Description** | Concerns were raised that the assessments were not calibrated to align with the circumstances of the accommodation request. Examples include the fitness-to-work assessment, which includes very little about mental health, and employees with permanent conditions who are asked to undergo repeated assessments, even though their condition or disability has not changed or the employee may have had a similar accommodation previously. |
| **Example quotes** | * “The questions need to be more specific to the condition. Having the doctor complete a form with three pages of questions that only relate to a physical disability when only the one page relating to a mental / psychological disability was relevant wastes the [employee’s], the doctor’s] and the manager’s time in analyses and response. The questions should be specific to the broad category of disability identified.” * “The fit to work form only works for physical health. If you broke your arm, yes, you can say that you can’t type or lift things, etc.” * “I feel that when a doctor has indicated that your condition is deemed permanent by a medical doctor then it should be noted on your file as such and further requests for a new doctor’s note not be made.” |

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| **Theme** | **Follow medical advice** |
| **Description** | Cases are highlighted where managers disagreed with, or otherwise questioned, the results of the assessment or where managers requested the assessment because they disagreed with earlier medical certificates, assessments or other evidence that had been provided. |
| **Example quotes** | * “Managers should not be able to demand a reassessment just because they disagree with findings by a qualified specialist in a previous assessment.” * “My employer ignored all of the medical information provided to them.” * “Immediate supervisors who receive workplace accommodation requests have no experience or training in occupational therapy or general health. They feel empowered to be able to deny or approve and will take their time doing so. If they consult a labour relations advisor or someone in disability management, they too may have no experience [or] training in occupational therapy or general health.” |

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| **Theme** | **Ensure that evaluators are bilingual** |
| **Description** | Some employees are concerned that they are unable to receive an assessment in their official language of choice. |
| **Example quotes** | * “The firm we were dealing with did not have a Francophone employee to do the assessment, so I had to agree to do my assessment in English or else I would have had to do the research myself to find someone French. It was very disappointing in terms of official languages, and there was a long delay between the evaluation and the implementation of the recommendations.” (Translation from French) * “It is extremely important to ensure that evaluators are bilingual in the sense that the person will be able to do the evaluation in the other language and would be able to write their report in the other language.” (Translation from French) |

### Other ways to improve the assessment phase

#### Q22. Aside from requests for medical certificates or formal assessments by a medical doctor or specialist, is there anything else that could have been done to improve the assessment phase?

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| **Theme** | **Provide more information and assistance** |
| **Description** | Common suggestions include providing more information about how the request process works, and access to knowledgeable and experienced people to help with aspects of the assessment phase, such as requesting information and preparing forms. This person could also act as an advocate for employees who often find themselves in a vulnerable position. |
| **Example quotes** | * “Having someone knowledgeable to help me to fill out the form and to review it before I hand it in would help. Having an accommodations advocate would be helpful.” * “Employees should be able to find out how an accommodation works. I still would have no advice to give someone….” * “There should be more information given to managers and supervisors on the subject. There should be a Disability Management Team to assist the employee in his gradual return to work or any other situation where the employee may need advice.” * “Having someone within the organization who was knowledgeable about the process and employee rights, who could and would advocate for me when I was at my most vulnerable would have been immensely helpful.” * “Having someone to talk to in the HR field (not LR) about options. My union rep was not very helpful.” |

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| **Theme** | **More understanding from managers** |
| **Description** | A common suggestion is for managers to be more understanding about accommodation requests to combat employees’ feeling that their request is nothing but a burden. Sensitivity training was also suggested for managers who deal with accommodation requests. |
| **Example quotes** | * “Again, during this phase I had to be my own advocate, fighting with my manager about my job description and such. I was not allowed to even contact HR with my questions. And as my manager was a major source of my stress and anxiety, it was a setback in my getting better.” * “A better attitude from middle management. It made me feel unwanted, a burden, lazy [and] inferior to see my immediate manager treat me this way, where I was not able to complete my assessment and be successful in what I was doing in my career.” * “Educate team leaders and all levels of management. Provide training for them on process and sensitivity training, as not all injuries are visible.” |

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| **Theme** | **More input from employees** |
| **Description** | There is a feeling that employee requests should be taken more at “face value,” that is, employees know best what they need, and including medical professionals adds an unnecessary layer to the process, particularly when information from doctors or specialists was provided previously. |
| **Example quotes** | * “How about having someone talk to me? I know what I need, I can explain to someone in the workplace what I need to remove barriers…. How do they think the information from the medical professional is obtained? It is obtained mostly by information from the patient.” * “More trust of the employee – what they say they want and how they want to be accommodated. Too much burden and unwillingness of management and HR to accommodate.” * “If I were a people manager and saw my employee was struggling with a chronic condition, I would ask them what kind of supports they or their medical provider would suggest to remove barriers and increase productivity, or I would perform that research myself and discuss options that might be of interest to my employee to improve their situation. This was definitely not done for me in my situation. I did all the research myself, and when I discussed options with my manager, the response was to wait for the laptop request to be actioned.” |

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| **Theme** | **Allow temporary or interim accommodations** |
| **Description** | Several employees suggest that, because the accommodation process can be long, temporary accommodations should be made available where possible, until the outcome of the request is decided. This would mitigate the impact of delays on employees’ health and productivity. |
| **Example quotes** | * “Allow temporary accommodation until the medical assessment can be completed, as sometimes it takes a long time to get appointments with specialists.” * “In the meantime, while everything is being completed, it would have been beneficial for the supervisor to implement a temporary accommodation based on the information so far. This would help the employee remain at work.” |

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| **Theme** | **Accountability of managers** |
| **Description** | Some employees suggest making managers more accountable for ensuring that accommodation requests are handled promptly and fairly. |
| **Example quotes** | * “Accountability of managers to make sure you are accommodated and treated respectfully. This should be part of their [performance management program / agreement]. There should also be someone / group making sure management is accountable for accommodating employees and preventing harassment.” * “Communication from management and for them to have a better understanding of their roles and responsibilities. Accountability for their actions or lack of actions.” |

### Thoughts and feelings about the assessment phase

#### Q23. What were the 1 or 2 main thoughts or feelings you had during the assessment phase prior to the decision about your accommodation request?

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| **Theme** | **Concern over the length of time for the process** |
| **Example quotes** | * “My concerns were based on a permanent disability, so I was not concerned about the assessment so much as the length of time it would take to get the accommodations in place. This would prove to be a valid concern.” * “Took a long time before any software [was] actually installed … close to 1 and a 1/2 years” * “I was anxious because of the time it took to wait for a decision. It was 2–3 months from when the initial request was sent to when I received any feedback from my team leader. Not knowing anything for that length of time was frustrating.” |

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| **Theme** | **Lack of empathy from management** |
| **Example quotes** | * “No one cares that I am injured. No one cares [that] my condition is getting worse and affecting all areas of my life outside of work as well. This caused a lot of stress, depression and anxiety as a result.” * “Felt like my time was being wasted and the concern was with box-checking and butt-protecting, rather than making sure I was set up to work well and be the most productive employee I could be.” * “Devalued, not equal to my peers. Denial for the right and need to work and be effective in my role.” |

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| **Theme** | **That the whole process is cumbersome** |
| **Example quotes** | * “Processes are cumbersome and burdensome on behalf of the employee.” * “I felt it was a long, cumbersome, stressful process that made my illness worse.” * “It was difficult coping with my injury, and I felt I had to jump through hoops in order to get my accommodation.” * “I felt challenged on everything, even with medical documentation. A truly exhausting and tough experience.” |

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| **Theme** | **Fear of reprisal from managers** |
| **Example quotes** | * “Fear that the information would be used in a negative way by my director.” * “Fear that it wouldn’t be worth the vulnerability, challenges and energy spent.” |

## 5. Decision / outcome phase

### Accommodation request outcome

Overall, most accommodation requests are approved, but this is less often the case for requests to address barriers related to cognitive, sensory or mental health issues. Only two thirds of approved requests are currently in place; adaptive technology is often a sticking point when they are not. Even among those whose accommodation is fully in place, dissatisfaction with the time it took is high, with four in ten saying they are dissatisfied (even higher when it is not fully in place).

The final phase of the accommodation process covered in the survey is the decision or outcome phase. This is when the request is approved or denied, and when approved accommodations are put in place.

Ultimately, a majority of the accommodation requests described by survey respondents did get approved. Seven in ten (72%) say their request has been approved. Another 15% say the decision is still pending, while 8% say their request was denied. When translated among all decided and known outcomes (that is, excluding pending decisions and those who preferred not to say), nine in ten requests were approved and 10% denied. These are consistent with the proportions reported in Phase 1 of this research.

**Table 20: accommodation request approved**

|  |  |  |
| --- | --- | --- |
| **Q24. As of right now, is your (most important or impactful) accommodation request:** | **Accommodation request related to a condition or disability (n=743)** | **Accommodation request related to a condition or disability and outcome is known (n=599)** |
| Approved | 72% | 90% |
| Denied | 8% | 10% |
| Pending | 15% | n/a |
| I prefer not to answer | 5% | n/a |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |  |

The likelihood of receiving approval of an accommodation request does not vary by age, gender, region or language. However, there are differences based on the type of health condition or disability associated with the request: approval is more common for accommodations to address flexibility or dexterity conditions and seeing disabilities; it is less common for accommodations related to hearing and mental health issues.

**Table 21: accommodation request approved, by health condition or disability type**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Accommodation request approved (among those where outcome is known)** |
| Issues with flexibility or dexterity (n=50) | 98% |
| Seeing disability (n=29)\* | 97% |
| Chronic health condition or pain (n=184) | 91% |
| Mobility issue (n=55) | 89% |
| Cognitive disability (n=37) | 89% |
| Sensory / environmental disability (n=45) | 84% |
| Mental health issue (n=97) | 79% |
| Hearing disability (n=18)\* | 78% |
| Base: made an accommodation request related to a health condition or disability and outcome is known  \* = small sample size; use caution when interpreting results  n = number of respondents | |

### Accommodation in place

Among respondents with an approved request, just under two thirds (64%) report that their accommodation is now fully in place. In around a quarter of cases, the accommodation is partially in place and, in a smaller number of cases, it is not even partially in place (7%).

**Table 22: accommodation currently in place**

|  |  |
| --- | --- |
| **Q25. Is your approved accommodation currently…?** | **Approved accommodation request related to a condition or disability (n=537)** |
| Fully in place | 64% |
| Partially in place | 28% |
| Not in place | 7% |
| I prefer not to answer | 1% |
| Base: approved accommodation request related to a health condition or disability  n = number of respondents | |

Among those with an approved request, respondents in Atlantic Canada are more likely (84%) than those in other regions to have their accommodation fully in place. There are no other demographic differences. The likelihood of having an approved accommodation fully in place varies by the type of health condition or disability, from seven in ten with mobility issues or seeing disabilities, to only four in ten with cognitive disabilities.

**Table 23: accommodation in place, by health condition or disability type**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Approved request is fully in place** |
| Mobility issue (n=49) | 71% |
| Seeing disability (n=28) | 68% |
| Chronic health condition or pain (n=168) | 64% |
| Sensory / environmental disability (n=38) | 63% |
| Issues with flexibility or dexterity (n=49) | 59% |
| Hearing disability (n=14)\* | 57% |
| Mental health issue (n=77) | 56% |
| Cognitive disability (n=33) | 39% |
| Base: approved accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

### Adaptive equipment working properly

Adaptive technology is working properly for eight out of ten respondents with approved accommodations that are fully in place. In the cases where the accommodation is only partially in place, seven in ten respondents say their adaptive devices or equipment is not working properly (61% only partially and 11% not at all).

**Table 24: adaptive technology working properly for accommodations in place and partially in place**

|  |  |  |
| --- | --- | --- |
| **Q26. If your accommodation request included adaptive devices, equipment, software or accessories, are these now working properly?**  **Q28. If your accommodation request included adaptive devices, equipment, software or accessories, are these now in place and working properly?** | **Accommodation is approved and fully in place** | **Accommodation is approved but only partially in place** |
| Yes | 82% | 29% |
| Partially | 15% | 61% |
| No | 2% | 11% |
| Base (Q26): employees whose accommodation included adaptive technology and is fully in place, n=213  Base (Q28): employees whose accommodation included adaptive technology and is approved but only partially in place, n=114  n = number of respondents | | |

### Satisfaction with length of time required for the accommodation to be implemented

A majority (53%) of respondents whose accommodation request is fully in place report being satisfied with the length of time it took, while three in ten (29%) report being very dissatisfied (7% are neither satisfied nor dissatisfied). Among those whose accommodation is only partially in place, satisfaction with the length of time it is taking for the accommodation to be put in place is very low (21% satisfied) and seven in ten are dissatisfied, including more than half (53%) who are very dissatisfied.

**Table 25: satisfaction with length of time it took or is taking for accommodation to be put in place**

|  |  |  |
| --- | --- | --- |
| **Q27. How satisfied are you with the length of time it took for your accommodation to be put in place?**  **Q29. How satisfied are you with the length of time it is taking for your accommodation to be put in place?** | **Accommodation is approved and fully in place** | **Accommodation is approved but only partially in place** |
| Very satisfied | 30% | 7% |
| Somewhat satisfied | 23% | 14% |
| Neither satisfied nor dissatisfied | 7% | 9% |
| Somewhat dissatisfied | 11% | 16% |
| Very dissatisfied | 29% | 53% |
| I prefer not to answer | less than 1% | 1% |
| Base (Q27): employees whose accommodation is fully in place, n=343  Base (Q29): employees whose accommodation is approved but only partially in place, n=151  n = number of respondents | | |

Sample sizes are not large enough for these questions to draw meaningful conclusions about differences by demographics or among different types of health conditions or disabilities related to the request.

### Request was denied

When requests involving a health condition or disability are denied, most employees do not feel sufficient explanation was provided to them. They often believe that negative management perceptions and a lack of knowledge about the condition are significant factors in the decision to deny their request. Employees whose request is denied often plan to seek alternative employment or early retirement, go on extended sick leave, or continue to work the best they can without accommodation.

Among respondents whose accommodation request was denied, a large majority (81%) say they were not given sufficient information to explain the reason why.

**Table 26: given enough information about why request was denied**

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| --- | --- |
| **Q30. Do you feel you were given enough information that explained why your accommodation request was denied?** | **Accommodation request was denied (n=62)** |
| Yes | 19% |
| No | 81% |
| Base: employees whose accommodation request was denied  n = number of respondents | |

Employees whose request was denied were presented with a list of possible factors that could have influenced the rejection of their requests and asked which (if any) applies to their situation. A majority of these respondents felt that management’s negative perceptions about their specific condition, a general lack of knowledge about that condition and an unwillingness on the part of management to vary their policies all played a part in the rejection of their request.

**Table 27: factors in accommodation request denial**

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| --- | --- |
| **Q31. In your opinion, do you feel that any of the following were factors in the rejection of your request?** | **Accommodation request was denied (n=62)** |
| Management had negative perceptions about my specific condition or disability | 63% |
| A general lack of knowledge about my specific condition or disability | 63% |
| Management was unwilling to vary policies | 55% |
| Management was concerned it would establish a precedent | 48% |
| A difficult relationship between me and my supervisor | 32% |
| My functional abilities were not accurately interpreted during the accommodation process | 27% |
| Management was concerned about perception of favouritism | 24% |
| Requested accommodation was too costly | 15% |
| Requested accommodation was too complex | 11% |
| None of the above | 5% |
| I prefer not to answer | 2% |
| Base: employees whose accommodation request was denied  n = number of respondents | |

Respondents whose request was denied were asked to describe what they planned to do next (in their own words). The most commonly cited next steps reported by respondents, as outlined below, appear to indicate the intent to change position or employer.

#### Q32. Since your accommodation request was denied, what, if anything, do you plan to do next?

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| --- | --- |
| **Theme** | **Find a new job or team** |
| **Description** | A common response is to move to another team within the public service or to look for alternative employment outside the public service. Some have already moved to another position, and others are in the process of trying to do so. |
| **Example quotes** | * “Find a new job or a new team. I don’t feel comfortable, and I shouldn’t have to feel this way because of how I was born. If I could change it, I would, but I can’t, and having managers unwilling to accommodate you based on their perception / understanding of your illness is one of the absolute worst feelings I have had to experience as an adult.” * “I plan to upgrade my education and leave for another department or leave the public service entirely.” * “Since I haven’t been accommodated, I continue to struggle. My main plan is looking for another job.” |

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| **Theme** | **Continue to work without accommodation** |
| **Description** | Some employees without an accommodation have continued in their current position, to the best of their abilities, despite not being equipped to make their full contribution. Others say they have abandoned their request after weighing it against potential damage to their future career prospects. |
| **Example quotes** | * “Continue working unaccommodated to the best of my abilities.” * “I am currently able to perform my duties without the accommodation. However, if my condition reoccurs, I will then discuss it with my new manager.” * “I plan to suck it up and accept things don’t always work out. Promotions are a popularity contest, and I’m not going to jeopardize my career over this.” |

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| **Theme** | **Appeal or try again to get the accommodation** |
| **Description** | Some employees mention trying to get their accommodation by appealing to a disability champion or advisory committee, or under the *Canadian Human Rights Act*. |
| **Example quotes** | * “Continuing to fight for accessibility of the renovations through the [redacted] disability committee, and those of Treasury Board and [redacted].” * “I will file a Human Rights Complaint. It’s just the right thing to do so that this does not happen to other people.” * “My request for accommodation was refused, I contacted the union to grieve that. I won at the second level for the first part…. I lodged a complaint with the [Canadian Human Rights Commission], and the case is quietly going on.” |

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| **Theme** | **Early retirement** |
| **Description** | Some employees intend to retire earlier than planned in order to avoid working without an accommodation. |
| **Example quotes** | * “I will be retiring soon, so I endure my backache, do exercises and go see my massage therapist on a regular basis. Hopefully, my back is not too damaged and I will be able to retire pain-free after a few weeks with less sitting in front of a computer.” * “I’m leaving the [redacted], retiring at the end of November. I am leaving sooner than I planned, but I am not willing to spend another winter dealing with crossing an icy parking lot or showing up at 7:00 to be able to park close to the building.” |

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| **Theme** | **Extended sick leave** |
| **Description** | Other employees reported a need to take extended sick leave as a result of not being appropriately accommodated. |
| **Example quotes** | * “Nothing except take my sick leave and use it up, then start unpaid leave, to attend therapy once a month for 2 hours.” * “I work the days I can, and I call in sick the days I can’t. I took 6 weeks off as per my [redacted] after I was denied the request….” |

### Challenges with the decision phase

Challenges regarding the decision phase revolve around the length of time it takes and a confrontational attitude and lack of communication from management. Common suggestions include better training for managers, an impartial employee advocate for the process, and better systems for protecting privacy, procuring equipment and documenting existing accommodations to avoid repeating requests in the future.

#### Q33. What 1 or 2 challenges or concerns, if any, did you have (or are currently having) with the decision phase?

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| --- | --- |
| **Theme** | **Length of time to get accommodation** |
| **Description** | Employees very commonly mention the amount of time that the accommodation process took, usually considering it from beginning to end, but with many mentioning long delays between request approval and implementation. |
| **Example quotes** | * “It has been about five years since the start, and basically only part of the request was completed. The other parts have never moved forward.” * “It took 8 months for management and [a] human resources Labour Advisor to arrive at a decision. The delay in processing my request has delayed implementing my treatment plan.” * “It took several months for my chair to actually be ordered after the formal ergo assessment was completed. I had to file a grievance to obtain work at home accommodations, which took over [redacted] years to resolve.” |

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| **Theme** | **Attitude and behaviour of managers** |
| **Description** | There is a sense that many managers do not appreciate the importance of accommodation to employees who need them, and some say their manager went beyond a lack of support and was actively attempting to impede or deny the requests. Other employees cite favouritism, as other people on their team received the same or similar accommodations before they did. |
| **Example quotes** | * “Management is afraid of change. Managers do not realize the negative impact of resisting employee need for accommodation. They need training and an attitude change.” * “My immediate manager impeded the process every step of the way. I felt the person was very spiteful and disrespectful towards me.” * “Bullying, threats from management. Decisions from those without knowledge.” * “My concerns are specifically about the conduct of my manager and her reluctance to move my case forward.” |

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| **Theme** | **Issues with equipment** |
| **Description** | In some cases, equipment that was part of the accommodation is not available or is not functioning properly. This also includes issues regarding procurement of equipment where delivery is delayed, or where no one procured the equipment for the employee. |
| **Example quotes** | * “Issues with software not being supported by IT, nor does it always work well with network issues with adaptive changes to settings, which impact my ability to navigate websites, documents, etc.” * “Yes, accommodations are all in place, but one of them is not effective because it is partially implemented. It has been more than a year since I asked for it to be completed.” * “Items are not being procured. It seems like I have to find the equipment myself and follow up with accommodations for adjustments. And the team responsible for physically modifying my work environment do not follow recommendations.” |

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| **Theme** | **Need to request the accommodation multiple times** |
| **Description** | Several employees mention they have had to request a re-approval of their existing accommodation whenever their direct manager changes. |
| **Example quotes** | * “I have a new manager now, [which] means I have to go through everything with her again, and I am just trying to get my work done instead of dealing with the request for accommodation.” * “The only time I had concerns was when I changed supervisor / manager. Thankfully, my new supervisor and manager fully supported my request to continue to work as accommodated by my previous supervisor / manager.” * “Although my accommodation is permanent, and I have been working based on my modified duties for over 4 years, my employer will only approve my accommodation in 2-year intervals. I will have to go through the entire process again.” |

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| **Theme** | **Accommodation not fully implemented or being ignored** |
| **Description** | Some employees who had their request approved note that it has not been fully implemented. Others report their accommodation was accepted but is not always being followed by managers (for example, still being assigned tasks that they should not be doing). |
| **Example quotes** | * “Not all devices were approved. Of the items approved, not all were implemented. Management did not want to implement all recommendations and instead asked me to accept the working conditions without the ability to request them again in the future.” * “The decision made is not understood by all supervisors – they continue to assign me to tasks which exceed my physical abilities.” |

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| **Theme** | **Lack of communication** |
| **Description** | A lack of communication between management and employee regarding the accommodation process is identified as a common challenge. |
| **Example quotes** | * “There was a lack of communication regarding progress of request.” * “[The decision phase] was horrible. At no time did management sit and discuss with me what was happening.” * “There is no communication from the employer on my accommodation request. There are no meaningful discussions regarding options or possible solutions. They present to me what they have decided is best and are not concerned with my input.” |

### What could have been done to improve the decision phase

#### Q34. What 1 or 2 things, if any, could have been done to improve the decision phase?

Suggestions provided by respondents tended to fall into six major themes:

1. Provide better training for managers about the duty to accommodate, the accommodation process and sensitivity training.
2. Provide a knowledgeable, neutral advocate in the accommodation process who can give advice and act as a go‑between to support the employee and facilitate the process.
3. Set up a better procurement system for adaptive equipment to avoid delays. Include a follow-up with the employee to ensure that it’s working correctly and that the employee knows how to use it.
4. Protect employees’ private health information as much as possible by limiting the number of people who are involved in the process and by enforcing strict information management requirements (“need to know” basis).
5. Create a centralized file for information related to accommodations so employees don’t have to request them multiple times if their job or manager changes.
6. Make managers more accountable for the accommodation process to ensure that requests are handled in a reasonable time.

### Thoughts and feelings during the decision / outcome phase

#### Q35. What were the 1 or 2 main thoughts or feelings you had (or are currently having) throughout the decision phase?

|  |  |
| --- | --- |
| **Theme** | **Length of time for accommodation implementation** |
| **Example quotes** | * “Satisfied with the decision, disappointed it took so long to implement the accommodation.” * “The main feeling was that it was taking a long time to process request, provide a medical certificate, have an ergonomic assessment, and then wait for the delivery of the licence required by the assessment. There seemed to be no recourse as to finding out when the devices would be delivered. In the meantime, my condition just got worse.” |

|  |  |
| --- | --- |
| **Theme** | **Negative view of accommodations** |
| **Example quotes** | * “This should have been an easier process. Why are accommodations looked at negatively when they will lead to a more productive workforce and improved morale?” * “Why does my employer care more about the process than me? Why does the employer follow the process to do ‘what’s right’ rather than finding out what would be best for me by doing ‘the right thing.’” * “I feel like I wasted my time; nothing would come of it until management’s attitude changed. No one truly cares about my work-life balance, and this process was designed to make me give up, quit, shut up and go away.” |

|  |  |
| --- | --- |
| **Theme** | **Lack of follow-up** |
| **Example quotes** | * “I am disappointed by the lack of support – I was given the software with no training. IT says they install the software but don’t support it, so when I have issues, I am on my own.” * “I find it frustrating that the government, when purchasing or procuring software, [does] not ensure that it will be accessible to all employees, and often accessibility appears to be an afterthought.” |

### Extended sick leave

A large proportion (40%) have taken extended sick leave because their condition was not appropriately accommodated; this is especially common for those facing workplace barriers due to mental health issues. Almost a quarter (23%) of employees who go on leave remain there for more than six months. Moreover, satisfaction with the level of support upon their return is very low. Respondents indicate that, aside from being properly accommodated in the first place, the need for sick leave could have been avoided by following the advice of doctors and specialists, providing more support, and promoting a better understanding of the accommodation process.

When accommodations for a workplace barrier are not provided, the outcome for some employees is extended sick leave. Four in ten respondents confirmed they have taken extended sick leave as a result of a health condition or disability that was not appropriately accommodated at some point in the past (note that this does not necessarily relate to the accommodation request that respondents were focusing on for this survey).

**Table 28: taken extended sick leave due to condition or disability aggravated by not being appropriately accommodated**

|  |  |
| --- | --- |
| **Q36. Have you ever taken extended sick leave due to a chronic condition or disability that was aggravated as a result of not being appropriately accommodated?** | **Accommodation request related to a condition or disability (n=743)** |
| Yes | 40% |
| No | 56% |
| I prefer not to answer | 4% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |

The proportion of respondents who have taken extended leave due to not being appropriately accommodated is higher among those aged 35 to 49, and lower in Atlantic Canada when compared with other regions. Extended sick leave due to unaccommodated workplace barriers varies by the type of health condition or disability but is especially high among those with a mental health issue (65%) and lowest among those with seeing and hearing disabilities.

**Table 29: taken extended sick leave due to condition or disability aggravated by not being appropriately accommodated, by health condition or disability type**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Taken extended sick leave as a result of not being accommodated** |
| Mental health issue (n=128) | 65% |
| Sensory / environmental disability (n=58) | 48% |
| Chronic health condition or pain (n=238) | 45% |
| Cognitive disability (n=50) | 38% |
| Issues with flexibility or dexterity (n=59) | 36% |
| Mobility issue (n=65) | 26% |
| Seeing disability (n=35) | 17% |
| Hearing disability (n=19)\* | 11% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

Respondents were also asked what could have been done differently to avoid them taking sick leave.

#### Q37. What, if anything, do you feel could have been done differently to avoid the need to take extended sick leave?

* **Being properly accommodated:** A main point is that, if they had been properly accommodated, they would not have had to go on sick leave. They mention that, if their request had been handled proactively and within a reasonable amount of time, the leave could have been avoided.
* **Following doctor’s recommendations:** A common reason respondents provide for why they had to take extended sick leave was managers ignoring the medical advice provided to them.
* **More support:** A lack of support and understanding for employees was also mentioned as a contributing factor in taking sick leave, as this often exacerbated the primary condition.
* **Promoting better understanding of the process:** A number of employees report being unaware of, or not knowledgeable enough about, the duty to accommodate and the options available to them before taking sick leave to have been able to avoid it.
* **Increase / improve support when returning from previous leave:** Some employees report a lack of support and understanding when returning to work from an earlier sick leave, resulting in the situation worsening over time and often requiring another extended leave.

Extended sick leaves longer than a month are very common, with 23% of these employees on leave for more than six months.

**Table 30: length of time on extended sick leave due to lack of accommodation**

|  |  |
| --- | --- |
| **Q38. How long were you on extended sick leave as a direct or indirect result of your chronic condition or disability not being appropriately accommodated?** | **Employees who have taken extended sick leave as a result of not being accommodated (n=296)** |
| Less than 1 month | 27% |
| 1 to 2 months | 22% |
| 3 to 6 months | 20% |
| 7 to 12 months | 9% |
| 13 to 18 months | 5% |
| 19 to 24 months | 5% |
| More than 24 months | 4% |
| I prefer not to answer | 7% |
| Base: employees who have taken extended sick leave  n = number of respondents | |

Respondents who went on extended sick leave were asked how satisfied they are with the support they received upon their return. Very few returning employees (16%) are satisfied with the level of support or accommodation they received upon their return; two thirds are dissatisfied, including more than half (53%) who report being very dissatisfied.

**Table 31: satisfaction with support / accommodation received when returning from sick leave**

|  |  |
| --- | --- |
| **Q39. How satisfied are you with the level of support and/or accommodation you received when you returned to work after the extended sick leave?** | **Employees who have taken extended sick leave as a result of not being accommodated (n=296)** |
| Very satisfied | 6% |
| Somewhat satisfied | 10% |
| Neither satisfied nor dissatisfied | 10% |
| Somewhat dissatisfied | 15% |
| Very dissatisfied | 53% |
| I prefer not to answer | 6% |
| Base: employees who have taken extended sick leave  n = number of respondents | |

### Overall satisfaction with the accommodation request process

A majority of respondents are dissatisfied with the accommodation process, but dissatisfaction is particularly pronounced among those requesting an accommodation to address workplace barriers related to a mental health issue.

Ultimately, when asked about the accommodation process overall, satisfaction is low. Only three in ten (31%) report being satisfied, while six in ten (58%) are dissatisfied, including a sizeable proportion (42%) who are very dissatisfied.

**Table 32: overall satisfaction with the entire workplace accommodation process**

|  |  |
| --- | --- |
| **Q40. Looking back over the entire workplace accommodation request process, and setting aside the end result for a moment, how satisfied are you overall with the process you went through?** | **Accommodation request related to a condition or disability (n=743)** |
| Very satisfied | 13% |
| Somewhat satisfied | 18% |
| Neither satisfied nor dissatisfied | 9% |
| Somewhat dissatisfied | 16% |
| Very dissatisfied | 42% |
| I prefer not to answer | 1% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |

Dissatisfaction outweighs satisfaction among every demographic group except those in Atlantic Canada (47% satisfied and 44% dissatisfied). Those who consider their primary health condition or disability invisible are more likely to be dissatisfied (65% compared with 52%). Dissatisfaction also increases as the number of accommodations that have been requested in the past three years increases. Finally, the type of condition or disability associated with the accommodation is an important consideration: more than seven in ten (72%) whose request involved a sensory or environmental disability, or a mental health issue, report being dissatisfied compared with those with a seeing disability or mobility issue, where less than half were dissatisfied.

**Table 33: overall satisfaction with the entire workplace accommodation, process by health condition or disability type**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Very or somewhat dissatisfied with the accommodation process overall** |
| Sensory / environmental disability (n=58) | 72% |
| Mental health issue (n=128) | 72% |
| Chronic health condition or pain (n=238) | 65% |
| Cognitive disability (n=50) | 62% |
| Issues with flexibility or dexterity (n=59) | 59% |
| Hearing disability (n=19)\* | 58% |
| Seeing disability (n=35) | 46% |
| Mobility issue (n=65) | 43% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

## 6. Career implications

### Feelings about future career prospects

Respondents’ views about their future in the Government of Canada are mixed: under four in ten feel positive, while two in ten are neutral and four in ten are negative about their career prospects. A major reason given for positive views is that they have received effective accommodation to overcome barriers related to their health condition or disability. In terms of negative views, respondents cite concerns about the effect that their condition or accommodation has on being viewed as a strong candidate for advancement, the negative impact that such perceptions could have on job references, and a belief that changing positions could jeopardize their existing accommodation.

To explore how workplace barriers related to a health condition or disability can impact career opportunities in the federal public service, employees were asked how positively they felt about their personal career prospects with the Government of Canada in the next five years. Views are mixed, with fewer than four in ten (37%) who feel positive about their career prospects, four in ten who feel negatively (41%), and the remaining two in ten who feel neutral.

**Table 34: negativity toward career prospects**

|  |  |
| --- | --- |
| **Q41. Turning now to a slightly different topic, overall, how do you feel about your career prospects with the Government of Canada over the next 5 years?** | **Accommodation request related to a condition or disability (n=743)** |
| Very positive | 14% |
| Somewhat positive | 23% |
| Neutral | 20% |
| Somewhat negative | 19% |
| Very negative | 22% |
| I prefer not to answer | 2% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |

Having a pessimistic view of their career prospects (saying “somewhat negative” or “very negative”) is higher among those older than 18 to 34 years old (between 40% and 44% among the older age groups compared with 24%) and those who speak English as a first language (44% negative compared with 29% of French speakers). Pessimism is also higher among those whose condition is permanent (46%) than where it is temporary or episodic. Similarly, the type of condition or disability is a factor, with a negative view about career prospects ranging from a high of 54% among those facing workplace barriers due to a cognitive disability to lows among a quarter of those with a hearing disability (26%) and mobility issues (23%).

**Table 35: negativity toward career prospects, by health condition or disability type**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Very or somewhat negative feelings about career prospects** |
| Cognitive disability (n=50) | 54% |
| Mental health issue (n=128) | 51% |
| Seeing disability (n=35) | 49% |
| Sensory / environmental disability (n=58) | 48% |
| Chronic health condition or pain (n=238) | 41% |
| Issues with flexibility or dexterity (n=59) | 39% |
| Hearing disability (n=19)\* | 26% |
| Mobility issue (n=65) | 23% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

There is a connection between negativity toward future career prospects and the way in which accommodations have been resolved for employees. Those whose request is fully in place are much less likely to see their career prospects in a negative light (30%), while those whose request is partially in place (45%) or whose request was denied (53%) are much more negative.

**Table 36: negativity toward career prospects, by request outcome**

|  |  |  |  |
| --- | --- | --- | --- |
| **Feelings about career prospects with the Government of Canada over the next 5 years** | **Request approved and fully in place (n=343)** | **Request approved and partially in place (n=151)** | **Request denied (n=62)** |
| Positive | 49% | 33% | 24% |
| Negative | 30% | 45% | 53% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | | | |

### Reasons for view of career prospects

#### Positive responses: Q42. Briefly, please elaborate on why you feel this way about your career prospects. Sub-sample: Feel positive about Government of Canada career prospects (n=279)

|  |  |
| --- | --- |
| **Theme** | **My accommodation is working** |
| **Description** | One common reason why employees say they are positive about their career prospects is that their accommodation has allowed them to recover or overcome some of the workplace barriers they were facing and to contribute fully to their team. |
| **Example quotes** | * “Now that I have the accommodation, I only worry that other parts of the department may demonstrate comparable resistance. I don’t want to fight this battle again. Nevertheless, I feel good about advancing my career, because I have succeeded to surmount the management resistance.” * “I’m recovering from my spinal / nerve issues post-surgery and having a sit / stand desk continues to be helpful. I expect that in a year or so I will be mostly recovered. Working at a desk is no longer limited by my physical disabilities, both due to my recovery and to the accommodation.” * “I feel that with my accommodation, I am able to make a full contribution to my workplace and be the kind of employee that others want to work with or have working for them.” |

|  |  |
| --- | --- |
| **Theme** | **I have better opportunities at a new department** |
| **Description** | Many employees who have moved to a new office or department say that their prospects are greatly improved since moving. This is because management at the new location is more willing to provide accommodation or has already provided accommodation that was unavailable at the previous position. |
| **Example quotes** | * “Dissatisfaction with my organization and management (for a number of reasons, not just the way they handled my accommodation) led me to seek a new opportunity – through my network – in a different organization within the last few months, and I have signed a letter of offer to deploy to a new department.” * “In my new division, I have my accommodation mostly set up the way I need it, but more importantly, I have the support of my manager and director to modify my work schedule (in office vs. work from home) as needed.” * “I am now working for a new organization where there is much more respect for work-life balance, and much more promotion of awareness around mental health and accommodations practices for any form of disability.” |

|  |  |
| --- | --- |
| **Theme** | **I am in a good position generally** |
| **Description** | Some employees mention that, despite their accommodation challenges, they are in a positive position due to their education, language skills, seniority and job performance relative to their peers. |
| **Example quotes** | * “My passion is to continue career opportunities within my current department. I possess a lot of knowledge and experience and have a lot to offer.” * “I have a higher level of education and training than many of my peers and have exceeded expectations on my last yearly evaluations. Hence, the likelihood that I may be terminated is small.” |

|  |  |
| --- | --- |
| **Theme** | **Positive outlook despite barriers** |
| **Description** | Some employees say they work hard to overcome (or work around) the barriers they encounter and that it does not represent a reason for negative career prospects. |
| **Example quotes** | * “My medical condition does not define me and does not define the work that I am able to do. I will have ‘bad days,’ but on all the other days, I am just like anyone else. During my leave, I was able to put a lot of things into perspective and came back to work with a new resolve and a new drive to find a new position.” * “I am a highly qualified and competent person who learns quickly when in the correct environment, so if the bureaucracy doesn’t get me to quit first, I think I’d be able to progress in my stream. Only somewhat [positive] because the bureaucracy will be the end of me….” |

|  |  |
| --- | --- |
| **Theme** | **Availability of telework** |
| **Description** | Employees who have been provided the opportunity to telework report that the expansion and normalization of this practice among the public service at large has improved their career prospects. |
| **Example quotes** | * “I will continue teleworking until I retire. I am more relaxed and able to actually work better, with better results.” * “Technology is becoming more complex, teleconferencing, video conferencing, virtual room. A lot of telecommuting … several offices in other regions, remote meetings.” |

#### Neutral or negative responses: Q42. Briefly, please elaborate on why you feel this way about your career prospects. Sub-sample: Feel neutral or negative about career prospects (n=451)

|  |  |
| --- | --- |
| **Theme** | **Condition or disability makes them a less favoured candidate** |
| **Description** | Employees with negative views of their career prospects explain that their condition or disability leads to them being perceived as a weaker candidate because accommodation is often required for the interview itself and many supervisors do not want to take on a team member who requires an accommodation. |
| **Example quotes** | * “I have light and noise sensitivity, which makes attending a workplace difficult. It is hard to progress [in] your career when you can’t go to an interview without asking for the lights to be dimmed or keep your hat and dark glasses on.” * “Having an accommodation that requires more than just adaptive technology or tools can be a career-limiting reality. When the reason for the accommodation is invisible, then it becomes even more of a challenge to be seen as capable…. It is troubling when the selection board starts off by knowing that you require an accommodation just to interview or write a test. The employee could be seen as high-maintenance.” * “I feel as though I am now too scared to disclose my disability. I feel that if I mention it in an interview that it will be taken into consideration on whether or not I will be hired. I am scared that anyone who wants to hire me will see the sick leave I have taken and that will deter them from granting me the promotion.” |

|  |  |
| --- | --- |
| **Theme** | **Condition or disability limits ability to perform other roles** |
| **Description** | Similarly, a condition or disability often limits an employee’s ability to perform functions that would be required in other positions. Examples include people with cognitive or sensory / environmental disabilities who may experience difficulty with a work-related social function and those who may face more limited opportunities, including supervisory roles, because they need to telework. |
| **Example quotes** | * “My big need for accommodations that remains unresolved is surrounding teleconferences and meetings, which are more and more prevalent as one advances through the ranks. I lose out on a lot of information, especially in teleconferences, and I do not participate verbally in them, and as such this would most likely be attributed to poor skills versus poor accommodation due to a disability.” * “I have a very high-functioning spectrum disorder, which is a barrier to advancement. I am at the senior working level, with management the next step, but it seems impossible. I have been told, repeatedly, that good managers do things like learn their employees’ kids’ names and what their kids are into, and ask about it often. So, unless I can put remembering birthdays and kids’ names and beginning every day visiting everyone’s cubicles above building a productive and efficient team with high morale and support, I will never advance.” * “There are not many positions that can be performed with telework, so my options are very limited.” |

|  |  |
| --- | --- |
| **Theme** | **Leaving my current position would jeopardize accommodation** |
| **Description** | Some employees say that needing to go through the accommodation process again at a new position to get the accommodation that they have at their current position also limits them. |
| **Example quotes** | * “I can’t consider moving into another department or position unless my current accommodations stay in place. Other opportunities require exposure to fluorescent and/or LED lights, and this would negatively impact my health, so I feel stuck in my current position. I would like the opportunity to try other positions, but I feel that my accommodations and health are barriers to this.” * “I was given a new position as part of my accommodation, and as a result this is likely where I will stay until I leave.” |

|  |  |
| --- | --- |
| **Theme** | **Concerns about references** |
| **Description** | Concerns that supervisors will provide poor references due to their view of the employee as a “troublemaker” or would disclose the employee’s condition or accommodation in a reference. |
| **Example quotes** | * “Concerns that this team leader will not give me a proper reference. My permanent position team leader will give me a fair reference but not the current one. I believe the current team leader may negatively affect my career prospects.” * “Partly because of my interaction with management, I believe I have ruffled some feathers and have my own thoughts regarding working for an organization that shows such a failure to respect the work-life balance of its employees.” |

|  |  |
| --- | --- |
| **Theme** | **Reasons unrelated to disability** |
| **Description** | A number of other reasons are given that are unrelated to a condition or disability, including that there are few positions available in the employee’s region, that the requirements for other positions are too difficult to meet, that the employee will be retiring soon and issues regarding the Phoenix system. |
| **Example quotes** | * “There are very few opportunities in my region, my current department.” * “There is no end in sight for the Phoenix fiasco to be fixed – whether I stay or leave.” * “I’m nearing the end of my career (approaching retirement) and don’t see any career progression opportunities now.” |

### Negative career effects

Respondents were asked a series of questions to determine whether they feel that they have faced negative outcomes as a result of their condition or disability. Just under half (49%) have opted out of a staffing process because of workplace barriers related to their health condition or disability. Four in ten (41%) feel that they have been denied a promotional opportunity due to reasons related to their condition or disability. Over half of respondents (54%) feel that they are underemployed, not challenged enough or could contribute more.

**Table 37: have experienced negative career effects**

|  |  |
| --- | --- |
| **Summary of negative career effect due to health condition or disability** | **Percentage saying yes** |
| Q43. Have you ever opted out of a staffing process because of workplace barriers or other considerations related to your chronic condition or disability? | 49% |
| Q44. Do you feel that you have ever been denied a promotional opportunity for a position you were qualified for because of reasons related to your chronic condition or disability? | 41% |
| Q45. Do you feel that you are underemployed or are not being challenged enough in your current position, or could contribute more than your position? | 54% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |

Those aged 35 to 49 are more likely than employees under 35 to have opted out of a staffing process (55% compared with 37%) and been denied a promotional opportunity (45% compared with 30%) due to workplace barriers related to their health condition or disability. Men are more likely than women to feel they are underemployed or could contribute more (63% compared with 50%).

Agreement that they have experienced all three negative career effects is more common among respondents whose health condition or disability associated with their accommodation request is permanent rather than temporary or episodic. The proportion who have experienced each of the three negative career effects varies by the type of health condition or disability. Opting out of a staffing process is more widespread among those with seeing disabilities and mental health issues. Being denied a promotional opportunity is most common among those with a cognitive disability, while feeling underemployed is most widespread among those with sensory or environmental disabilities.

**Table****38: have experienced negative career effects due to health condition or disability, by type of health condition or disability**

|  |  |  |  |
| --- | --- | --- | --- |
| **Summary by employee health condition or disability type** | **Opted out of a staffing process due to workplace barriers** | **Denied a promotional opportunity due to chronic condition or disability** | **Feel underemployed, not challenged enough or could contribute more** |
| Seeing disability (n=35) | 63% | 57% | 66% |
| Mental health issue (n=128) | 59% | 52% | 59% |
| Cognitive disability (n=50) | 54% | 64% | 60% |
| Chronic health condition or pain (n=238) | 52% | 41% | 51% |
| Sensory or environmental disability (n=58) | 52% | 43% | 72% |
| Hearing disability (n=19)\* | 47% | 47% | 53% |
| Issues with flexibility or dexterity (n=59) | 42% | 27% | 61% |
| Mobility issue (n=65) | 38% | 34% | 46% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | | | |

More than four in ten respondents say that, at some point in the past, they have made the decision **not** to request an accommodation that would have helped them do their job.

**Table 39: have ever chosen not to request an accommodation that would have helped them**

|  |  |
| --- | --- |
| **Q46. Have you ever chosen *not* to request an accommodation that would have improved your ability to carry out your job-related duties?** | **Accommodation request related to a condition or disability (n=743)** |
| Yes | 43% |
| No | 42% |
| Not applicable / have not required another accommodation | 13% |
| I prefer not to answer | 3% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |

The proportion who have previously chosen not to request an accommodation is higher among women (45%) than men (36%) and among those aged 35 to 49 (51%) compared with other age groups. It is also higher among those with hearing disabilities, cognitive disabilities and mental health issues, and lower among those with flexibility or dexterity issues or a seeing disability.

**Table****40: have ever chosen not to request an accommodation that would have helped them, by health condition or disability**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Chosen *not* to request an accommodation in the past** |
| Hearing disability (n=19)\* | 58% |
| Cognitive disability (n=50) | 54% |
| Mental health issue (n=128) | 52% |
| Mobility issue (n=65) | 48% |
| Chronic health condition or pain (n=238) | 45% |
| Sensory / environmental disability (n=58) | 43% |
| Issues with flexibility or dexterity (n= 59) | 32% |
| Seeing disability (n=35) | 31% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

Respondents who have chosen in the past not to make a request were asked their reasons (from a list provided). The top reasons include concern about management’s perception of them, how it will affect their career prospects, and the impact on their relationship with their manager, as well as a belief that their request would not be approved. These are generally consistent with the qualitative comments throughout the survey. Concerns about management’s perceptions of them is of particular concern to those facing workplace barriers due to mental health issues (85%). Otherwise, the results are consistent by age, gender, region and language.

**Table 41: reasons for not making past accommodation request that would have helped them**

|  |  |
| --- | --- |
| **Q47. When you chose not to request an accommodation that would have improved your ability to carry out your job-related duties, what were your reasons for this?** | **Employees who have chosen not to make a request (n=317)** |
| Concerned about management’s perception of me | 75% |
| Concerned it might affect my job security or future career prospects | 63% |
| Concerned about my relationship with my supervisor | 53% |
| Believed my request would not be approved | 52% |
| Didn’t want to disclose information about workplace barriers or my chronic condition or disability | 48% |
| Concerned about my co-workers’ perception of me | 46% |
| Believed I could manage the situation on my own | 38% |
| Concerned about my relationships with my co-workers | 34% |
| Other reasons | 20% |
| I prefer not to answer | 1% |
| Base: employees who have chosen not to request an accommodation in the past  n = number of respondents | |

## 7. Harassment and discrimination

Reported experiences of harassment and discrimination are common among survey respondents who made an accommodation request related to a health condition or disability; the number of respondents reporting harassment and discrimination in this survey is higher than the number of people with a disability who reported such experiences in response to the 2019 Public Service Employee Survey (PSES). More than eight in ten survey respondents link the discrimination they experienced to their health condition or disability, and seven in ten say the same about their experience with harassment.

### Harassment

Data from the 2019 Public Service Employee Survey (PSES) indicates that harassment[[3]](#footnote-4) in the workplace is much more widely experienced by people with disabilities (PWD) than by those without. The 2019 PSES found that one in three (29%) of PWD reported being the victim of harassment in the past 12 months, compared with 12% of non-PWD. One aim of this research is to explore this gap in more depth; thus, all respondents to the survey were asked whether they had experienced harassment in the past 12 months.

The results here are higher than those of the 2019 PSES: 38% of respondents who made an accommodation request associated with a health condition or disability, including 42% of those who say that they face workplace barriers due to a health condition or disability, say they have been the victim of harassment in the past year.

**Table 42: been the victim of harassment in the past 12 months**

|  |  |  |
| --- | --- | --- |
| **Q55. In the past 12 months, have you been the victim of harassment?** | **Accommodation request related to a condition or disability (n=743)** | **Experience barriers in the workplace due to a condition or disability (n=651)** |
| Yes | 38% | 42% |
| No | 56% | 53% |
| I prefer not to answer | 6% | 6% |
| Base: made an accommodation request related to a health condition or disability  Base: experience barriers in the workplace due to a health condition or disability  n = number of respondents | |  |

Among those whose accommodation request involved a chronic health condition or disability, the likelihood of having experienced harassment is similar regardless of gender, age or language, and it does not vary based on the permanence or visibility of the health condition or disability associated with the request.

Reported experiences of harassment are more widespread for certain types of condition or disability than others and are especially common for those whose accommodation request was related to a mental health issue (52%).

**Table 43: been the** **victim of harassment in the past 12 months, by health condition or disability**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Have been the victim of harassment in the past 12 months** |
| Mental health issue (n=128) | 52% |
| Chronic health condition or pain (n=238) | 41% |
| Sensory / environmental disability (n=58) | 41% |
| Cognitive disability (n=50) | 40% |
| Issues with flexibility or dexterity (n=59) | 36% |
| Mobility issue (n=65) | 34% |
| Seeing disability (n=35) | 31% |
| Hearing disability (n=19)\* | 16% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

Respondents who reported being a victim of harassment in the past 12 months are more likely than not to perceive a connection with their health conditions and disability. Almost three in four respondents who have recently experienced harassment say it was either strongly (48%) or somewhat (24%) related to their condition or disability. This is especially true when an accommodation request is made to address barriers related to a mental health issue (66% say the harassment is strongly related to their condition).

**Table 44: relationship between harassment and chronic health condition or disability**

|  |  |
| --- | --- |
| **Q56. In your opinion, to what extent was the harassment you experienced in the past 12 months related to your chronic health condition or disability?** | **Have experienced harassment in the past 12 months (n=286)** |
| Strongly related | 48% |
| Somewhat related | 24% |
| Not related | 26% |
| Not applicable / do not have a chronic health condition or disability | less than 1% |
| I prefer not to answer | 2% |
| Base: employees who made an accommodation request related to a health condition or disability and have experienced harassment in the past 12 months  n = number of respondents | |

### Discrimination

The 2019 PSES reveals a similar gap between PWD and non-PWD in terms of experiences of discrimination in the past 12 months: 23% of PWD reported being the victim of discrimination, compared with only 6% of non-PWD.

Once again, the current survey included the 2019 PSES question in order to delve deeper into experiences with discrimination.[[4]](#footnote-5) More than a third of respondents to this survey who made an accommodation request involving a health condition or disability (35%) say they have faced discrimination in the past year. Among the specific subgroup who self-identify as experiencing barriers in the workplace due to a condition or disability, this proportion is slightly higher (38%).

The proportions reporting harassment and discrimination in response to the survey are both higher than those reported by PWD in the 2019 PSES. While a direct link cannot be confirmed given that this online survey was not completed by all PWD, the survey data suggests a possible link between the act of making an accommodation request and the experience of harassment and/or discrimination.

**Table 45: been the victim of discrimination in the past 12 months**

|  |  |  |
| --- | --- | --- |
| **Q57. In the past 12 months, have you been the victim of discrimination?** | **Accommodation request related to a condition or disability (n=743)** | **Experience barriers in the workplace due to a condition or disability (n=651)** |
| Yes | 35% | 38% |
| No | 57% | 54% |
| I prefer not to answer | 8% | 7% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |  |

Among those whose accommodation request involved a chronic health condition or disability, the proportion that report experiencing discrimination is similar regardless of gender, age and language. It also does not vary based on the permanence or the visibility of the health condition or disability associated with the request. Again, however, experiences of discrimination are more common for certain types of condition than others and are reported more often by those with a mental health issue.

**Table 46: been the victim of discrimination in the past 12 months, by health condition or disability**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Have been the victim of discrimination in the past 12 months** |
| Mental health issue (n=128) | 48% |
| Cognitive disability (n=50) | 40% |
| Mobility issue (n=65) | 38% |
| Sensory / environmental disability (n=58) | 38% |
| Hearing disability (n=19)\* | 37% |
| Chronic health condition or pain (n=238) | 34% |
| Seeing disability (n=35) | 31% |
| Issues with flexibility or dexterity (n=59) | 29% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

Respondents who report being victims of discrimination in the past 12 months are likely to perceive a connection with their health conditions and disability. When taken along with those who say it was somewhat related, an overwhelming majority (85%) say that they believe the discrimination they experienced was at least partially related to their condition or disability.

**Table 47: relationship between discrimination and chronic health condition or disability**

|  |  |
| --- | --- |
| **Q58. In your opinion, to what extent was the discrimination you experienced in the past 12 months related to your chronic health condition or disability?** | **Have experienced discrimination in the past 12 months (n=263)** |
| Strongly related | 65% |
| Somewhat related | 20% |
| Not related | 14% |
| Not applicable / do not have a chronic health condition or disability | less than 1% |
| I prefer not to answer | 1% |
| Base: employees who made an accommodation request related to a health condition or disability and have experienced discrimination in the past 12 months  n = number of respondents | |

## 8. Key messages

The key messages for management from employees are: to act in good faith by taking accommodation requests seriously, to understand that accommodations are not being requested because employees are lazy or incapable and, generally, to take a more open and understanding approach to the subject (including better communication).

### Key messages for management

#### Q48. What 1 or 2 key things would you most like your managers to know about people in your situation that would help them better support and enable you as an employee?

|  |  |
| --- | --- |
| **Theme** | **Take accommodation requests seriously** |
| **Description** | A major theme is that supervisors need to take requests seriously and act in good faith by trusting that employees genuinely need the accommodation to be able to contribute to their fullest potential. Supervisors should not view it as the employee’s fault and should understand that making the request is a difficult thing for employees to do. |
| **Example quotes** | * “Believe me and remember I am an adult trying to take care of myself and my future.” * “We are not trying to get out of work. Sometimes our issues are not visible to another person, but that doesn’t make them less real. Your demands to repeatedly prove our condition to our employer puts added stress on us.” * “Accommodations are often critical to allow an employee to complete their duties without risking harm in some way. Without the accommodation that I was provided, I would have had to continue being on leave for another two months.” * “It is important to take employees’ requests for accommodations seriously. Employees may be intimidated and uncomfortable in coming forward, but when they do come forward, it is because they have a real issue that needs accommodating.” |

|  |  |
| --- | --- |
| **Theme** | **People with accommodations are not lazy or less capable** |
| **Description** | Another common theme is that managers should not judge people based on their limitations and should not see people who require accommodation as less able to perform their job-related tasks. Instead, employees should be seen as people who want to contribute and are able to excel if provided with the support they require. |
| **Example quotes** | * “We are not lazy; we actually want to contribute to the success of the public service. We have many skills that can be extremely useful in many other positions overall.” * “That we are capable and can excel at the job function even though we might do things a little different or understand in different ways.” * “Do not judge people by their accommodation requests. Consider their work.” * “Do not judge people on what you think their limitations are. Be open to the person in front of you and see their strengths, ask what their strengths and interests are, and help them build on how they deliver based on their personal preferences.” |

|  |  |
| --- | --- |
| **Theme** | **Show more empathy and openness** |
| **Description** | In a similar vein, managers need to show empathy and openness to the accommodation process and understand the vulnerable position that the employee is in when requesting an accommodation. They also should not have pre-judgments about specific types of conditions or disabilities and instead try to learn more about them. |
| **Example quotes** | * “We want to work and contribute to the very best of our abilities to have a meaningful career. If you are a manager who is unempathetic to serious and/or chronic health conditions, consider not being a manager. People should come first.” * “I guess it would be to make (managers) aware of what an employee needs. I realize that the workplace is full of different people with different needs or concerns, but it might be helpful if supervisors and/or managers take courses and/or awareness courses on the disabilities that are ‘out there’ so that they are familiarized with each type of disability that they may encounter in the workplace.” |

|  |  |
| --- | --- |
| **Theme** | **More open communication** |
| **Description** | Maintain an open, two-way dialogue with employees to understand their position. Continually update employees while a request is ongoing and check in or follow up regularly. |
| **Example quotes** | * “Managers need to continually engage accommodated employees in the decision process regarding job placements and changes. They need to review past and current accommodation requests, and ensure they are prepared to offer work that takes these needs into account.” * “Check in, follow up regularly. Open the opportunity for conversation, discussion and feedback. Don’t assume we’re fine because you don’t see the struggle – accommodations take a team effort. A partnership in wellness would go a long way to creative inclusiveness.” * “Dialogue (hearing and listening), flexibility and empathy should be key elements when discussing accommodations with the employee requesting the accommodation. There is a shared responsibility between managers and employees when it comes to accountability and transparency which stems from trust and potential benefits for both parties.” |

|  |  |
| --- | --- |
| **Theme** | **Understand invisible conditions and disabilities** |
| **Description** | Another connected theme was that managers need to understand that not all disabilities are visible and that, although a person may be smiling, it doesn’t always mean that they are happy. |
| **Example quotes** | * “Not all disabilities are visible (especially mental health issues). Mental health issues can seriously affect one’s ability to concentrate if not appropriately accommodated.” * “Just because we smile, it doesn’t mean that we are happy. When we verbally express that our mental health is not okay, they don’t seem to care much or help you find a position that will accommodate you better.” * “Even though people with cognitive and communication disabilities may think and act differently from other employees, they experience the same need for acceptance, belonging and desire to contribute to meaningful work.” |

### Key messages for co-workers

The main message to convey to co-workers is that accommodations aim to make employees more productive by overcoming barriers, not making their jobs easier. Other key themes are: to treat people with accommodations or disabilities with respect, to better understand invisible conditions and disabilities, and to not judge those with accommodations as being less capable.

#### Q49. What 1 or 2 key things would you most like your co-workers to know about people in your situation that would help them better support you as a valued team member?

|  |  |
| --- | --- |
| **Theme** | **Accommodations are not an attempt to do less work** |
| **Description** | A common wish is for colleagues to understand that the aim of an accommodation is to make the employee more productive, not make their job easier. It is not a type of special treatment or advantage for people who do not have the same functional abilities; it is support to enable the employee to contribute to the same degree as everyone else. |
| **Example quotes** | * “I am not asking for accommodations for fun but because it makes me more productive and a better employee / co-worker. What can be very easy for you, and used to be easy for me, can be excessively difficult for me now.” * “Accommodations being made for chronic pain sufferers are to help them be more productive members of the team. It’s not about making their lives easier simply for the sake of wanting to be more comfortable but helping them make the best of their situation.” * “Also, co-workers should know that if a disabled person receives an accommodation, it is not an advantage. Rather, it’s a way to make things more even; the accommodation often won’t even make things even but will make it more fair for the disabled employee.” |

|  |  |
| --- | --- |
| **Theme** | **Be respectful** |
| **Description** | Another theme is that employees with accommodations are hoping to be treated respectfully. Do not discuss, comment or joke about someone’s condition or accommodation. Be supportive and non-judgmental. |
| **Example quotes** | * “You never know what people are struggling with … **be kind and respectful!**” * “I would like my co-workers to know that they should not discuss my disability in the workplace. I would like my co-workers to never start a sentence with ‘well, [respondent’s name] probably didn’t hear.” * “My work, my schedule, my accommodation and my medical issues are none of your business. If you had the same or similar issues, you are entitled to all the support you need. Please leave the comments, the cold shoulders and the judgment out; be respectful and considerate.” * “To be supportive and not judgmental – it’s pretty simple to do!” |

|  |  |
| --- | --- |
| **Theme** | **An accommodation does not mean someone is less capable** |
| **Description** | It is important that co-workers understand that the need for accommodation or support to perform their job-related duties doesn’t make someone any less capable or skilled. |
| **Example quotes** | * “I’d like co-workers to know that we’re just there to do the same job they are and that our need for accommodations doesn’t make us any less capable or skilled than they are.” * “I would like to educate my team members on the accommodation portfolio to help people understand that those of us who are accommodated should be provided with the same respect and can still remain a productive member of the team.” * “People with disabilities need support (like all employees). They are just as capable as others.” |

|  |  |
| --- | --- |
| **Theme** | **Understand invisible conditions and disabilities** |
| **Description** | It is important for many employees that their co-workers understand that a disability or condition may not always be visible to them, but that does not mean that it is still not present. They need to show understanding and patience. |
| **Example quotes** | * “I’d like co-workers to know that people, particularly with invisible disabilities, are suffering in silence. I would like to tell people about my disability, but the negative experiences and knowledge of general attitudes makes me very reluctant to share this.” * “Keep an open mind to invisible disabilities and don’t be so quick to judge or ridicule (e.g., someone who takes the elevator up one floor could have a spinal / knee condition). Someone who goes to the washroom often could have incontinence. Someone who is wearing skirts all the time may have a health reason for doing so and does not need attention drawn to it.” |

### Employee accommodation passport

The concept of an employee accommodation passport is well received, with a strong majority of respondents in every demographic group and with every type of condition or disability saying it would be helpful to people in their situation.

One of the issues raised in this survey was the need to reapply for an accommodation when changing positions or locations or when their manager changes. This is perceived as an unnecessary burden on employees, especially those who have long-term or permanent health conditions or disabilities.

To address this concern, the Government of Canada is considering implementing an accommodation passport allowing employees with an approved accommodation to transfer it when they move to other federal departments or positions. The overwhelming majority (92%) of respondents requesting an accommodation related to a health condition or disability say the accommodation passport concept would be very (73%) or somewhat (19%) helpful to people in their situation.

**Table 48: how helpful the accommodation passport would be to people in their situation**

|  |  |
| --- | --- |
| **Q50. The Government of Canada is exploring the possibility of an “accommodation passport” program that would allow employees who have an approved accommodation to transfer it to another federal department or position. How helpful do you feel this would be to people in your situation?** | **Accommodation request related to a condition or disability (n=743)** |
| Very helpful | 73% |
| Somewhat helpful | 19% |
| Not very helpful | 3% |
| Not at all helpful | 3% |
| I prefer not to answer | 3% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | |

There is widespread support for an accommodation passport regardless of gender or age. The proportion who say that this passport would be very helpful is higher in Atlantic Canada (85%) and among those who speak French as a first language (83% compared with 70% with English as their first language), although it’s unclear why this would be. Those who are more satisfied with the accommodation process overall are more likely to find this concept very helpful than those who were dissatisfied (82% compared with 69%). This implies that there are other issues with the accommodation process that they feel that the passport would not necessarily improve.

Majorities of two thirds or more in every health condition or disability type say the passport concept would be very helpful to them, although this view is most widespread among those with mobility and flexibility or dexterity issues. Interest in this concept is similarly high regardless of whether the health condition or disability associated with their accommodation request is permanent or temporary, and visible or not.

**Table 49: how** **helpful the accommodation passport would be to people in their situation, by type of health condition or disability**

|  |  |
| --- | --- |
| **Summary by employee health condition or disability type** | **Would find the passport very helpful** |
| Mobility issue (n=65) | 85% |
| Issues with flexibility or dexterity (n=59) | 83% |
| Hearing disability (n=19)\* | 79% |
| Cognitive disability (n=50) | 76% |
| Chronic health condition or pain (n=238) | 73% |
| Mental health issue (n=128) | 69% |
| Sensory / environmental disability (n=58) | 69% |
| Seeing disability (n=35) | 66% |
| Base: made an accommodation request related to a health condition or disability  \* = small sample size; use caution when interpreting results  n = number of respondents | |

## 9. Comparison of groups of interest

### Comparison of disability and non-disability accommodation requests

Respondents who made requests unrelated to a health condition or disability are more likely to have their request denied.

The main focus of this research is accommodation requests that revolve around a health condition or disability. A total of 59 respondents did not attribute their request to a condition or disability, with 44 stating explicitly that it was related to another purpose (such as family or religious reasons) and 15 who did not respond to the question. This section explores differences observed in the responses between those whose request involved a health condition or disability and the 44 cases who said that it did not.

The differences between the two groups are mainly present when looking at questions that ask about the structure and aims of the request they chose as the most impactful to them. The requests that do not involve a health condition or disability tend to revolve around flexibility related to work start or end times in order to meet family or care commitments or to reduce travel times. One indication of this is that, while almost all of those whose assessment involved a condition or disability report facing barriers in the workplace as a result of a condition or disability (88%), only a small proportion of those whose accommodation request did not involve a condition or disability experiences such barriers (20%).

The only other notable significant difference between these groups is that non-disability requests are more likely to be denied than those that do involve a chronic health condition or disability.

The observed differences between these two groups are summarized in the tables below.

**Table 50: experienced barriers in the workplace due to health condition or disability, by request type**

|  |  |  |
| --- | --- | --- |
| **Q2. Have you experienced barriers to your ability to perform tasks and activities in the workplace as a result of a chronic health condition or disability?** | **Request about condition or disability (n=743)** | **Request made for another reason (n=44)** |
| Yes | 88% | 20% |
| No, I have not experienced these barriers | 11% | 73% |
| I prefer not to answer | 1% | 7% |

Base:all respondents

n = number of respondents

**Table 51: accommodation request approved, by request type**

|  |  |  |
| --- | --- | --- |
| **Q24. As of right now, is your (most important or impactful) accommodation request:** | **Request about condition or disability (n=743)** | **Request made for another reason (n=44)** |
| Approved | 72% | 68% |
| Denied | 8% | 20% |
| Pending | 15% | 7% |
| I prefer not to answer | 5% | 5% |

Base:all respondents

n = number of respondents

While there are some differences between the genders in terms of the types of health conditions that lead to accommodation requests, women are more likely to be asked to provide evidence, to have taken extended sick leave due to a lack of appropriate accommodation, and to say they have chosen not to request accommodations in the past.

### Gender

Few significant gender-based differences are identified in this research. There are some differences in terms of the nature of the disability or health condition that led to the accommodation request: chronic health conditions or pain and sensory / environmental disabilities are more widely reported by women, while seeing disabilities are more widely reported by men. Women are more likely to say that this condition is episodic or recurring than men.

**Table 52: health condition or disability that led to accommodation request, by gender**

|  |  |  |
| --- | --- | --- |
| **Q3/Q8. Which of the following categories most closely describes the nature of your primary condition or disability / other condition or disability that led to your accommodation request?** | **Women (n=463)** | **Men (n=168)** |
| A chronic health condition or pain | 39% | 27% |
| A sensory or environmental disability | 10% | 5% |
| A seeing disability | 4% | 10% |
| Base: made an accommodation request related to a health condition or disability and details of condition / disability are known  Note: only significant differences shown  n = number of respondents | | |

**Table 53: permanence of health condition or disability that led to accommodation, request by gender**

|  |  |  |
| --- | --- | --- |
| **Q4/Q9. Is (or was) your primary chronic health condition, pain, environmental sensitivity or other disability temporary, episodic or permanent?** | **Women (n=463)** | **Men (n=168)** |
| Permanent | 62% | 69% |
| Episodic (recurring) | 30% | 21% |
| Temporary | 5% | 8% |
| I prefer not to answer | 3% | 2% |
| Base: made an accommodation request related to a health condition or disability and details of condition / disability are known  n = number of respondents | | |

Women are more likely to report being required to provide a medical certificate or other evidence, but there is no difference in terms of being required to undergo a formal assessment.

**Table 54: required to get a medical certificate or other evidence or undergo a formal assessment, by gender**

|  |  |  |
| --- | --- | --- |
| **Q18. Were you required to provide a medical certificate or other evidence to support the accommodation request?**  **Q20. Were you required to participate in any of the following types of formal assessments by a medical doctor or specialist?** | **Women (n=509)** | **Men (n=195)** |
| Yes, required to provide evidence | 81% | 73% |
| Yes, required to participate in a formal assessment | 70% | 69% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | | |

Finally, women are more likely to have taken extended sick leave as a result of a condition or disability that was not appropriately accommodated and to say they have chosen not to request an accommodation that would have improved their ability to carry out their job-related duties.

**Table 55: taken extended sick leave due to a condition or disability aggravated by not being appropriately accommodated, by gender**

|  |  |  |
| --- | --- | --- |
| **Q36. Have you ever taken extended sick leave due to a chronic condition or disability that was aggravated as a result of not being appropriately accommodated?** | **Women (n=509)** | **Men (n=195)** |
| Yes | 41% | 32% |
| No | 54% | 65% |
| I prefer not to answer | 5% | 3% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | | |

**Table 56: have ever chosen not to request an accommodation that would have helped them, by gender**

|  |  |  |
| --- | --- | --- |
| **Q46. Have you ever chosen *not* to request an accommodation that would have improved your ability to carry out your job-related duties?** | **Women (n=509)** | **Men (n=195)** |
| Yes | 45% | 36% |
| No | 38% | 50% |
| Not applicable / have not required another accommodation | 14% | 11% |
| I prefer not to answer | 3% | 3% |
| Base: made an accommodation request related to a health condition or disability  n = number of respondents | | |

### Summary by type of health condition

Differences in the experiences of employees according to the type of condition or disability are noted throughout the individual sections above, but key differences are also summarized in Table 57.

**Table 57: summary of differences by health condition or disability that led to accommodation request**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Element** | **Chronic health or pain (n=238)** | **Mental health (n=128)** | **Mobility issue (n=65)** | **Cognitive disability (n=50)** | **Flexibility or dexterity (n=59)** | **Seeing (n=35)** | **Hearing (n=19)\*** | **Sensory /  environmental (n=58)** | |
| Difficulty knowing how to initiate the process (% difficult) | 57% | 58% | 29% | 68% | 61% | 63% | 47% | 52% | |
| Medical certificate or other evidence requested (% yes) | 87% | 82% | 74% | 82% | 83% | 54% | 79% | 78% | |
| Formal assessment requested (% yes) | 75% | 68% | 77% | 74% | 85% | 49% | 47% | 48% | |
| Request approved (% yes where outcome is known) | 91% | 79% | 89% | 89% | 98% | 97% | 78% | 84% | |
| Extended leave (% yes) | 45% | 65% | 26% | 38% | 36% | 17% | 11% | 48% | |
| Dissatisfaction with the process (% dissatisfied) | 65% | 72% | 43% | 62% | 59% | 46% | 58% | 72% | |
| Experienced harassment (% yes) | 41% | 52% | 34% | 40% | 36% | 31% | 16% | 47% | |
| Experienced discrimination (% yes) | 34% | 48% | 38% | 40% | 29% | 31% | 37% | 38% | |
| Future career prospects (% negative) | 41% | 51% | 23% | 54% | 39% | 49% | 26% | 48% | |
| Base: made an accommodation request related to a health condition or disability and details of condition / disability are known  \* = small sample size; use caution when interpreting results  n = number of respondents | | | | | | | | |

The significant differences among employees whose accommodation request was related to different types of health condition or disability are summarized below:

* **Chronic health condition or pain:** These employees are more likely to be asked for a medical certificate or other evidence, more likely to have taken an extended sick leave as a result of not being appropriately accommodated, and more likely to be dissatisfied with the accommodation process overall.
* **Mental health issue:** These employees are the least likely to have their request approved, the most likely to have taken an extended sick leave as a result of not being appropriately accommodated, more likely to be dissatisfied with the accommodation process overall, and the most likely to have been the victim of harassment and discrimination in the past 12 months.
* **Mobility issue:** These employees are the least likely to have difficulty knowing how to initiate the accommodation process, more likely to be satisfied with the accommodation process overall, and the least likely to have a negative view of their career prospects.
* **Cognitive disability:** These employees are the most likely to have difficulty knowing how to initiate the accommodation process and the most likely to have a negative view of their career prospects.
* **Flexibility or dexterity issue:** These employees are the most likely to be required to get a formal assessment and the most likely to have their request approved.
* **Seeing disability:** These employees are the least likely to be asked for a medical certificate or other evidence, less likely to be required to get a formal assessment, less likely to have taken an extended sick leave as a result of not being appropriately accommodated, and less likely to be dissatisfied with the accommodation process overall.
* **Hearing disability:** These employees are less likely to be required to get a formal assessment, less likely to have taken an extended sick leave as a result of not being appropriately accommodated, and the least likely to have been the victim of harassment in the past 12 months.
* **Sensory or environmental disability:** These employees are less likely to be required to get a formal assessment, more likely to have taken an extended sick leave as a result of not being appropriately accommodated, and more likely to be dissatisfied with the accommodation process overall.

### Employees who have taken extended sick leave

Beyond differences connected to the nature of the health condition or disability that led to the accommodation and demographics provided in [Section 5](#_Extended_sick_leave) of this report, those who have taken extended sick leave as a result of not being accommodated appropriately (although not necessarily related to the accommodation request made in the past three years) differ in numerous ways from those who have not. It should be noted that, while there is a relationship between the variables described below, it cannot be determined that their experiences with the accommodation process have caused them to take extended sick leave (or vice versa). Table 58 summarizes the observed differences between the two groups.

**Table 58: summary of significant differences among those who have ever taken extended sick leave due to not being appropriately accommodated as compared to those who have not**

|  |  |
| --- | --- |
| **Question** | **Those who have taken extended sick leave as compared to those who have not** |
| Number of accommodations requested | More likely to have made more than two accommodation requests (42% as compared to 27%) |
| Difficulty finding out how to initiate the accommodation process | Found it more difficult to know how to find out how to initiate the process (64% difficult as compared to 45%) |
| Medical certificates and/or other evidence and formal assessments required | More likely to have been asked for evidence (89% as compared to 72%) and to be asked to get a formal assessment (79% as compared to 62%) |
| Request approved and in place | Less likely to have request approved (67% as compared to 77%) and, when approved, their request is more likely to be either partially or not in place (47% as compared to 28%) |
| Satisfaction with length of time to get accommodation in place | Lower satisfaction with length of time taken, whether the accommodation is already in place (32% as compared to 61%) or not (6% as compared to 25%) |
| Factors in the rejection of the request | More likely to cite management’s negative perception and a lack of knowledge about their condition (81% as compared to 50%) and a difficult relationship with their manager (52% as compared to 18%) |
| Satisfaction with the accommodation process overall | Less likely to be satisfied with the accommodation process overall (14% as compared to 44%) |
| View of future career prospects | More likely to have a negative view of their career prospects (51% as compared to 32%) |
| Negative career outcomes | More likely to have:   * opted out of a staffing process (65% as compared to 38%) * been denied a promotional opportunity (58% as compared to 29%) * chosen not to request an accommodation (51% as compared to 38%) |
| Base: have taken an extended sick leave due to not being appropriately accommodated (n=296) or have not (n=416)  n = number of respondents | |

# Supervisor survey

## 1. Classification

Half of supervisors have received, at most, an average of one accommodation request per year over the past three years. In that time, most have experience with requests involving either permanent or temporary health conditions or disabilities, including those considered “invisible.” Half of those handling requests involving invisible conditions say they involve a more complex assessment process, typically because they require additional medical and/or other evidence, including formal assessments.

### Experience with accommodation requests in the last three years

Supervisors were asked how many separate times they received an accommodation request from an employee in the past three years. Each supervisor responding to this survey previously participated in the Phase 1 survey, and therefore it was known that they had received at least one accommodation request. Many supervisors have limited experience with accommodation requests: half (52%) received no more than one request per year on average over the past three years. One in five supervisors handled four or five requests over that time, and more than a quarter (28%) had more experience, handling more than five.

**Table 59: number of workplace accommodation requests made for employees in past three years**

|  |  |
| --- | --- |
| **Q2. As a supervisor, how many workplace accommodation requests were requested for your employees in the past 3 years, for any reason?** | **Total supervisor sample (n=178)** |
| 1 request | 14% |
| 2 requests | 17% |
| 3 requests | 21% |
| 4 or 5 requests | 20% |
| More than 5 requests | 28% |
| Base:all supervisors  n = number of respondents | |

The amount of recent experience handling accommodation requests does not vary significantly by gender, region, first language or executive / non-executive status of the supervisor.

Supervisors were also asked whether they encountered any of three types of accommodation requests over the past three years. Most (85%) have handled at least one request to address barriers in the workplace related to a permanent, chronic or episodic condition, and two thirds (67%) have handled at least one request to address barriers in the workplace related to a temporary condition. By comparison, relatively fewer (33%) have handled a request for another purpose, such as for family or religious reasons.

**Table 60: types of workplace accommodation requests made by employees**

|  |  |
| --- | --- |
| **Q3. Have any of your employees requested a workplace accommodation in the past 3 years for any of the following reasons?** | **Total supervisor sample (n=178)** |
| Permanent, chronic or episodic | 85% |
| Temporary | 67% |
| For other purposes | 33% |
| Base:all supervisors  n = number of respondents | |

There are no demographic differences by age, gender, region, language or executive / non-executive status with respect to the types of requests that supervisors have handled.

### Accommodation requests involving invisible health conditions or disabilities

Three quarters of supervisors say they have received accommodation requests in the past three years for conditions that could be considered invisible.

**Table 61: experience with invisible health conditions or disabilities**

|  |  |
| --- | --- |
| **Q4. For requests that you received in the past 3 years for a workplace accommodation to address a permanent, chronic or episodic (recurring) disability or health condition, did any of these requests involve a disability or health condition that was invisible, meaning that someone interacting with this employee in the workplace would, in most cases, be unaware of their disability or health condition?** | **Total supervisor sample (n=178)** |
| Yes | 74% |
| No | 11% |
| Have not handled a permanent, chronic or episodic disability or health condition accommodation request | 15% |
| Base:all supervisors  n = number of respondents | |

Supervisors who are more experienced with recent accommodation requests are more likely to have encountered a request involving an invisible disability or health condition (90% of those who have received 4 or more requests in the past 3 years). Otherwise, there are no differences by demographics or between executives and non-executives on this measure.

Supervisors who handled an accommodation request involving an invisible health condition or disability were asked whether this makes the assessment process more complex. A slim majority (54%) say it adds complexity to the assessment process, while just under half (46%) say it makes no difference or is less complex.

**Table 62: whether invisible conditions or disabilities add complexity to the assessment process**

|  |  |
| --- | --- |
| **Q5. To what extent, if any, did the invisible nature of an employee’s disability or health condition change the complexity and/or difficulty of the assessment process? Did it make the process…?** | **Supervisors with experience with requests involving invisible conditions (n=131)** |
| Significantly more complex | 18% |
| Somewhat more complex | 36% |
| Made no difference | 44% |
| Somewhat less complex | 1% |
| Significantly less complex | 1% |
| Base:supervisors who have experience with requests involving invisible conditions, n=131  n = number of respondents | |

Belief that the invisible nature of the employee’s disability or condition increases the complexity of the assessment process is more widespread among non-executives (59% as compared to 26% of executives) and among supervisors with greater experience with accommodation requests over the past three years (62% of those who handled four or more requests as compared to 27% of those who handled only one).

Supervisors who say accommodations involving an invisible health condition or disability adds complexity to the assessment process were asked what factors contribute to this (from a list provided). Most of this group points to the need for additional evidence or a formal assessment by an external specialist (76%). Other factors that contribute to the complexity are limited knowledge about the implications of the health condition or disability in the workplace (55%) and concerns that the accommodation will be perceived as favouritism or preferential treatment (38%). It is unclear whether the invisible nature of the health condition or disability contributes to concerns about incorrect perceptions, given that co-workers are more likely to be unaware of the disability and therefore may be unaware of a need for accommodation.

**Table 63: factors contributing to added complexity of invisible condition / disability request**

|  |  |
| --- | --- |
| **Q6. You indicated that the invisible nature of an employee’s disability or health condition increased the complexity and/or difficulty of the process involved in assessing their accommodation request. Which of the following factors contributed to the process being more complex and/or difficult in this situation?** | **Supervisors who feel invisible conditions or disabilities add complexity (n=71)** |
| Additional evidence and/or a formal assessment by an external doctor or specialist was required | 76% |
| Limited knowledge about the implications of the disability or health condition in the workplace | 55% |
| Concern about perceived favouritism or preferential treatment | 38% |
| Concern about creating a precedent | 25% |
| No departmental resources with functional expertise in disability management | 23% |
| Management considered the issue to be performance-related, not disability-related | 23% |
| Management didn’t agree with information provided by doctor or specialist | 17% |
| Management didn’t agree with the need for an accommodation | 7% |
| Other | 32% |
| Base:supervisors who feel that invisible conditions / disabilities add complexity, n=71  n = number of respondents | |

There are few significant differences by demographics or by executive / non-executive status, with the exception that men are more likely than women to say the complexity is due to limited knowledge about the implications of the disability or health condition in the workplace (69% as compared to 45% of women), and women are more likely to say the complexity stems from the fact that management considered the issue to be performance-related rather than disability-related (31% as compared to 12% of men).

## 2. Accommodation request process

Some supervisors do not find it very easy to have conversations with their employees about workplace accommodation requests due to the often sensitive nature of the discussion and the difficulty employees can have articulating their needs. Common challenges with the request process include insufficient training and support and the complexity of the process. When asked directly, only one in ten find the process very clear, and only three in ten say it is very clear who to contact for help. Approaches that supervisors have found helpful include having a supportive and compassionate attitude and maintaining ongoing communication with the employee.

### Conversations about accommodation requests

A large majority of supervisors reported that it is very easy (46%) or somewhat easy (44%) to have conversations with employees regarding their accommodation requests.

**Table 64: difficulty of conversations with employees regarding a workplace accommodation request**

|  |  |
| --- | --- |
| **Q7. When an employee approaches you about requesting workplace accommodations, how easy or difficult have you found it to have these conversations?** | **Total supervisor sample (n=178)** |
| Very easy | 46% |
| Somewhat easy | 44% |
| Somewhat difficult | 9% |
| Very difficult | 2% |
| Base:all supervisors  n = number of respondents | |

Whether supervisors find the conversations easy or difficult is not related to demographic variables such as age, gender, region or language, and more experienced supervisors and executives are no more likely to say they find them easy.

About one in ten supervisors reported that they find it somewhat difficult (9%) or very difficult (2%) to have conversations with employees about workplace accommodations, and these individuals were asked what they find difficult about them in order to identify opportunities to make such conversations easier for all supervisors in the future. A variety of concerns were raised, including a lack of supervisor training and the difficulty employees have articulating their specific need. The responses generally fell into four broad themes, which are summarized below.

#### Q8. Why do you say that? What is particularly difficult about such conversations?

|  |  |
| --- | --- |
| **Theme** | **Not trained / prepared for sensitive conversations** |
| **Description** | Some supervisors who find these discussions difficult say that the content of the discussions (health issues) is not their area of expertise. They are not trained on how to have these discussions and can be unsure how best to respond in a sensitive and supportive way. |
| **Example quotes** | * “I’m not a doctor or professional or counsellor, and topics / issues under discussion are sensitive and emotional and reactive – you never know how the things you are trying to say may trigger an adverse reaction or overreaction or severe emotional reaction – not equipped to deal with these conversations properly.” * “It is always difficult to talk about health issues.” * “A lack of training.” |

|  |  |
| --- | --- |
| **Theme** | **Employees often have difficulty articulating their needs** |
| **Description** | A common difficulty is when an employee cannot clearly articulate what accommodation they need. Some supervisors have encountered situations where the employee does not know what they need, has a vague request or is asking because they would like an accommodation that they know other employees have received. |
| **Example quotes** | * “For conditions such as PTSD, without any supporting documentation from a medical professional, it was difficult to determine what was actually required.” * “The employee has difficulty expressing what their needs are. Sometimes they want desk items because others have them without specifying what their need is. As management, you need to juggle accommodating individuals with real needs and those who just see what others have.” * “Sometimes it is difficult for the employee to articulate what they need in order to be accommodated, whether from a lack of knowledge about the process or inability to access resources.” |

|  |  |
| --- | --- |
| **Theme** | **The process and a lack of knowledge about specific conditions make trust difficult** |
| **Description** | Some supervisors explain it can be difficult to show empathy and help their employee at the beginning of the process as they do not have the necessary background information on the condition, and they most often do not know whether they will be able to provide an accommodation. Also, the requirements for evidence can be taken by the employee as an attack or a sign that they are not being trusted. |
| **Example quotes** | * “Depending on the nature of the issue, it is challenging to offer empathy and a workplace solution because in that moment, I do not know what the options are, if any. The employee is generally seeking leave or an alternative work arrangement, and due to limited information about their situation / what is required and what is a viable option, all I can offer is ‘I will look into it,’ which may not be comforting in that moment. Also, in one case, the employee felt they were being challenged to prove their condition and justification for full-time work at home (which was true) and made threatening, mean-spirited comments because they just wanted to work at home without needing further medical assessments.” * “I had to request the employee provide detailed medical information from their treating physician and then had to write a justification explaining how the work requirements will be met by the employee, along with the additional steps of a remote workplace security assessment and a costing of setting up the remote workplace. It takes several months, and it creates mistrust between me and the employee.” |

|  |  |
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| **Theme** | **Employees lack clarity on evidence demands and what can be accommodated** |
| **Description** | Another cause of difficulty is that the informational requirements in terms of medical evidence and what can be accommodated are often not made clear to employees. They can be unaware that medical evidence must include information about functional limitations, and their documents do not specifically identify or demonstrate a clear requirement for the accommodation. |
| **Example quotes** | * “They are often difficult conversations in that employees are not getting accurate and objective advice from union partners, so they come into the conversation with the belief that as soon as they request any accommodation that the employer must acquiesce.” * “Employees understand that they are able to request accommodations, but they do not understand their obligations to provide adequate information to the employer in order to meet that. Doctors are also providing notes that do not provide specific functional restrictions or limitations. I’ve received notes that say employee x doesn’t have to do anything they don’t feel they can do, notes that are drafted by the employee and signed off by the doctor, and notes that have non-medical restrictions or recommendations regarding who an employee can report to, what types of reports they can write, etc.” |

### Challenges during the request phase

When asked about challenges they have encountered during the accommodation request process, supervisors mention insufficient training and support as well as the complexity of the process itself.

#### Q9. What problems or challenges, if any, have you encountered during the request process that you feel need to be done differently?

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| --- | --- |
| **Theme** | **Need more training, guidance and assistance** |
| **Description** | A common observation among supervisors is a lack of training and guidance regarding the process. They want better access to “hands-on” assistance from functional experts whose job it is to help navigate the process. Other suggestions include a clear step-by-step guide for managers and joint union-management training to create a shared understanding of roles and responsibilities for all parties. |
| **Example quotes** | * “Lack of guidance for what managers can do for their staff. In all my cases, I agree completely with the accommodations requested, but still found it difficult to navigate the system. For newer or less experienced managers, this may have been interpreted as the system not supporting the requests.” * “I have found that sometimes the manager is unaware of the proper procedures, especially when talking about a sit / stand desk required by employees. There should be some kind of general step-by-step process for these cases specifically, since I have seen a steady increase in such accommodation requests.” * “It was difficult to find someone to help our team with all the details of the accommodation. There was a lot of back and forth between multiple individuals to figure out who would do what with requests.” |

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| **Theme** | **Issues getting medical evidence** |
| **Description** | There are frustrations involved in obtaining medical evidence that clearly identifies employees’ functional need. This and other confusion regarding exactly what information is required from medical professionals can result in inappropriate or unhelpful documentation and/or multiple visits to specialists. Interestingly, although many supervisors cite a need for greater expert advice and support in general, some state that doctors and specialists should not provide recommendations (such as advice on working conditions, environmental factors or accommodation measures), even though this information represents expert advice that could be leveraged to inform the design of accommodation solutions that meet specific employee needs and circumstances. |
| **Example quotes** | * “Another challenge comes from the documentation received where, unfortunately, some doctors seem to know little about our environment and to sign notes of convenience and/or limitations that are unclear and require, for the most part, clarifications, which prolongs the employee’s downtime.” * “Ability for physicians to identify employee limitations versus providing recommendations.” * “Need better information on functional needs from employee’s medical team, rather than an accommodation measure per se. Often we will receive an accommodation from a medical practitioner that says employee needs ‘a closed office’ rather than the functional need such as ‘low light’ or ‘distraction-free’ zone. Back and forth with medical providers wastes time.” |

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| **Theme** | **Difficult and complex process** |
| **Description** | The complex and cumbersome nature of the request process is commonly mentioned by supervisors who highlight “red tape”: the amount of medical evidence required, the number of approvals needed and issues with procurement processes and installation. There are suggestions of a more streamlined and simplified process, especially when it comes to providing adaptive devices. |
| **Example quotes** | * “The whole question of technological adaptations. The processes are too long and complex.” * “The interactions between the manager (representing the employer), HR, the employee, their representative and the physician to obtain restrictions and limitations can be time-consuming and create delays in determining appropriate accommodations for employees. An expedited process for more straightforward accommodations would streamline this process and ensure less complex cases are accommodated more quickly as well as reduce red tape.” * “I feel like the process for requesting assistive devices from IT and Procurement could be streamlined and simplified. We were given a bit of the runaround related to whether our department had the licence for a product, which version of the product we could access, how to procure it. It involved several different steps and different people. Had the [executive assistant] on our team not been highly skilled, persistent and detail-oriented, much of this could have slipped through the cracks, and the employee could have waited many more months to get the tools she needed to do her job.” |

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| **Theme** | **Should trust employees and doctors more to combat the appearance of favouritism** |
| **Description** | There are concerns that the process creates the feeling that supervisors do not trust employees. Some supervisors suggest being more accepting of the request by not requiring as much medical and/or other evidence (which causes additional stress and delays). Others suggest changing or reconsidering the requirement that medical evidence focus on functional limitations instead of specific recommendations. |
| **Example quotes** | * “I feel that the employees and, by extension, their doctors should be trusted more to know what they need. I don’t think we’re suffering from a glut of people trying to game the system via superfluous accommodation requests.” * “It also feels like there’s a distrust of the requestor, as though they are asking for this because (a) they can and we have to pay for it, (b) someone else got something that they want too, like an adjustable desk, or (c) a doubt in the nature of the reported issue because they ‘appear fine.’ This has actually prevented me from requesting an ergonomic assessment for myself, because I don’t want to be looked upon in a negative light.” * “I agree that there needs to be flexibility as a manager, but I need to be able to use my discretion within a better framework. The perception of favouritism is rampant.” |

### What works well during the request phase

Supervisors say that a supportive and compassionate attitude and ongoing communication are keys to ensuring that the request process works effectively.

**Q10. What, if anything, have you found works well during the request process?**

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| --- | --- |
| **Theme** | **A compassionate approach and emotional intelligence** |
| **Description** | In cases where supervisors approach the interaction with the requesting employee with respect and compassion, the process goes more smoothly for everyone. Displaying emotional intelligence makes the employee feel heard and fosters the feeling their supervisor is working in their interest. |
| **Example quotes** | * “It works well if the individual having the conversation has solid emotional intelligence and if the employee is more forthcoming with their issues, especially if it is an invisible disability.” * “Open communications and compassion along with willingness to assist the employee goes a long way to making the person feel heard and respected.” |

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| **Theme** | **Open communication and setting realistic expectations** |
| **Description** | Supervisors suggest that as much as possible be done at the outset of the process to ensure that the employee understands their rights and responsibilities, what will be required of them and how the request will proceed – this sets expectations. Maintaining open communication with the employee by updating them on the progress of their request also makes the process more positive. |
| **Example quotes** | * “Having the employee clearly say what they are looking for in terms of options for accommodation so we can work with those ideas to come up with something that can work for both the employee and workplace.” * “Just encouraging open and honest conversations and approaches and finding win-win solutions.” * “Having the employee come up with suggestions for assignments they can work on makes it easier for us to know exactly what their capabilities / limitations are.” * “Being open and sensitive to the person’s needs, demonstrating your openness while also explaining the employer’s position. When a mutual understanding is reached, the best accommodation for both parties can be established.” |

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| **Theme** | **Having support and resources** |
| **Description** | Where they received it, supervisors mention the support provided by partners (that is, functional experts) as contributing positively to the process. References were also made to specific resources that made the process easier, such as a dedicated section on their departmental intranet. |
| **Example quotes** | * “Working with knowledgeable, responsive and helpful advisors definitely makes the process easier for managers.” * “We have a disability management team that we can consult, so that helps.” * “Having a wellness centre that helps with the demands for pay and speaks to the employee to explain the process.” * “There is excellent information on our department’s internal website, and my department has very knowledgeable / experienced advisors.” |

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| **Theme** | **Compromise** |
| **Description** | There is a perception on the part of some that compromise between employees and management is necessary when trying to find an accommodation, even if this means a change in position or a solution other than what was originally requested. In light of the comments in the employee survey, it should be acknowledged that, while this may make the process smoother for the supervisor, it does not necessarily equate to the desired outcome that may be achievable where the employee has the accommodation they need to contribute to the best of their ability in the workplace. |
| **Example quotes** | * “Compromise on both sides, both the employee and the manager.” * “When the employee understands and accepts their personal situation, and that the accommodation that best works for them may not be the one that allows them to stay in the same job. The employee may have to give something up in order to be accommodated. Also, where the employee understands that there are limits to what management can do to accommodate them in the current job, and the employee is willing to work together with management in order to try to achieve the best results for everyone.” |

### Clarity of the process

Supervisors were asked about how clear they find the process for requesting an accommodation for an employee and for identifying who to contact for assistance in processing a request. Only one in ten (11%) find the process very clear. Half (51%) find it only somewhat clear, and a sizeable minority (37%) find it unclear.

There appears to be slightly more clarity regarding who to contact for assistance in processing an accommodation request, with three in ten who say it is very clear (30%). Nonetheless, 37% say it is only somewhat clear and one third (32%) say it is unclear who they can contact for help.

**Table 65: clarity of process for requesting an accommodation and who to contact for assistance**

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| --- | --- | --- | --- |
| **Q11. In your view, is the process clear for supervisors who request an accommodation for an employee?**  **Q12. In your view, is it clear who you should contact for assistance in processing an accommodation request for an employee?** | **Clarity of process for requesting an accommodation for an employee** | **Clarity of who to contact for assistance when processing a request** | |
| Very clear | 11% | 30% | |
| Somewhat clear | 51% | 37% | |
| Not very clear | 26% | 17% | |
| Not at all clear | 11% | 15% | |
| I prefer not to answer | 1% | 1% | |
| Base:all supervisors, n=178  n = number of respondents | | |  |

There are no demographic differences for either question by gender or age, but the proportion who find it unclear who to contact for help in processing a request is higher among those based in the National Capital Region (45% saying not very clear or not at all clear).

All supervisors (regardless of their view on the clarity of the process) were asked how the accommodation process could be made clearer to them. The responses fell into five broad themes, which are summarized below.

**Q13. How could any aspect of the accommodation process be made clearer for supervisors such as yourself?**

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| --- | --- |
| **Theme** | **Clear step-by-step description of the process** |
| **Description** | A common request is a clear and simple step-by-step overview of the process in the form of a flow chart, process map or checklist. |
| **Example quotes** | * “I would like a ‘How To’ page so I can just follow a process step by step.” * “Process map would be helpful for newer supervisors and managers – or even for experienced supervisors who have not been exposed to the accommodations process for some time.” * “Have a clear guidance document that is applicable to all [Government of Canada] departments.” |

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| **Theme** | **Better organization of existing resources** |
| **Description** | Some supervisors say they had difficulty finding the existing information or resources on their departmental intranet or that information about different steps in the process wasn’t all in the same place. Thus, they suggested the information be more centralized and contain clear contact information for getting assistance. |
| **Example quotes** | * “Well, a better search engine on InfoZone would help. The information on accommodations is so deeply buried it can take 10 or more minutes just to find it when it’s needed. It has the barest outline of the steps, the documents to request a medical assessment are buried another link deep, and there is no guidance whatsoever on how to open this conversation, what you should and shouldn’t say for newer team leaders.” * “A proper Infoweb page that outlines the process, with points of contact. Maybe a detailed guide on what needs to be completed when.” * “I could not find any actual description of the process – only a contact person, which is not immediately obvious to find.” |

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| --- | --- |
| **Theme** | **Training for supervisors** |
| **Description** | Provide mandatory training for all supervisors (a) when they are first appointed to ensure that they have a good base of understanding before they are required to handle an accommodation request, and (b) on an ongoing basis to ensure that they have the most recent information. |
| **Example quotes** | * “It might be recommended that there be a course for team leader[s] / managers to attend on the process of requesting items for employees with accommodation requests. The process has changed, and lots of people are not aware of the changes.” * “Proper training at the beginning of any [management group] appointment. I basically had to figure it out by looking for online references and contacting Labour Relations, all while performing regular work duties. It ends up taking up all of your time. This is not something you should be learning on the fly while trying to meet deliverables, especially for a new manager.” * “Make training sessions mandatory. No one thinks they will have to deal with an accommodation until it happens, and that is too late to understand the rules and options.” * “Ongoing training and consultation … to maintain a current level of knowledge.” |

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| --- | --- |
| **Theme** | **Clarify position on accommodation and provide the resources required to deliver on it** |
| **Description** | There is confusion about the government’s position on accommodations, and supervisors often do not understand the duty to accommodate employees and equip them to contribute to the best of their ability. This needs to be clarified and communicated to employees and supervisors and backed up by resources necessary to deliver on this duty. |
| **Example quotes** | * “Have a clear process that is respected by all managers within the department and to hold managers accountable when they refute the acceptance of a [duty to accommodate], particularly when they hire another individual in process of, or immediately after, reviewing the [duty to accommodate].” * “By clarifying the aspects of the process regarding employee and union input into the accommodation measures. Some employees and union reps believe that being consulted on the accommodation measures to be put in place is the same as having a veto over those measures. The [Treasury Board of Canada Secretariat] policies and those of the responsible departments and agencies need to be clarified as to where decision-making responsibility lies, who can provide input, and what management’s responsibilities are as far as that input is concerned. Ensure all front-line and middle management supervisors are provided in-depth training on legal requirements for accommodation and best practices.” * “I believe that clarity is required more for the employees. Somehow, there is a developed belief that an employee may request an accommodation and automatically be approved.” |

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| --- | --- |
| **Theme** | **Standardizing procedures across departments** |
| **Description** | Having more standardized procedures and processes across departments is seen as something that would clarify things. Currently, different departments have different approaches and levels of availability for internal resources who can assist with requests. |
| **Example quotes** | * “It would be great to have procedures and processes which are standard across all departments – everyone does it differently. Why can’t we have one consistent approach so if a manager changes a department it would be easy for them to find how to implement.” * “It would be clearer if there was a consistent accommodation policy backed up by operation procedures.” * “The [Disability Management] Advisors spend their full days in support of employees and negotiating, facilitating and managing these cases from a solutions-based perspective. However, many departments do not have the same, and even for those that do, the processes are inconsistent from one department to another across [government]. That is wrong, because an employee requiring an accommodation should not be treated differently when they move departments or when new managers join.” |

## 3. Assessment phase

Almost all supervisors have had cases that required the employee to provide a medical certificate or other evidence to support their accommodation request. While some suggest this process could be improved by clarifying the information required from medical professionals, others question when – and if – medical certificates or other evidence should be required. The majority of supervisors have also had cases requiring formal assessments. Suggestions for improving this aspect include streamlining the process to ultimately speed it up, refining the standard forms, and dropping the need for a doctor’s assessment on top of an ergonomic assessment.

### Medical certificates or other evidence

An overwhelming proportion of supervisors (90%) have had an employee who was required to provide a medical certificate or other evidence to support their request.

**Table 66: requirement for employees to provide a medical certificate or other evidence**

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| --- | --- |
| **Q15. Have any of your employees requesting an accommodation been required to provide a medical certificate or other evidence to support their request?** | **Total supervisor sample (n=178)** |
| Yes | 90% |
| No | 7% |
| Not sure | 3% |
| Base: all supervisors  n = number of respondents | |

This high proportion of supervisors who have an employee required to provide a medical certificate or other evidence is consistent by age, gender, region and executive / non-executive status.

Supervisors were asked to provide suggestions about how to improve the process for medical certificates. While some supervisors suggested changes to the forms (that is, to clarify the information to be collected through the forms), others questioned when – and even if – medical evidence should be required. The themes are summarized below.

#### Q14. Employees who request an accommodation may be required to provide a medical certificate or other evidence to support their request. From what you know or have heard, what suggestions, if any, do you have to change or improve the medical certificate requirement that would lead to better outcomes?

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| --- | --- |
| **Theme** | **Clarify medical information needs** |
| **Description** | Key to improving the medical certificate requirement is clarifying what information is required from the medical professional. Without a clear description of what must be provided to support an accommodation request, supervisors often receive forms that include generic or missing information, resulting in multiple information requests. There are also suggestions to introduce a standardized form geared to accommodation requests. |
| **Example quotes** | * “There should be some kind of guide that we can send with the forms to help the physicians. Having to go back to the physician time and again bogs down the whole process, making it far more complicated than needed.” * “That we have a clear questionnaire that the doctor must complete, along with the employee’s job description, to avoid having to ask for a clarification later.” * “We should have a standardized questionnaire that takes into account different scenarios from simple to more complex that medical practitioners can also follow easily when determining what we need or can do to accommodate the employee. There should be a section that maybe outlines what would constitute what an employee with challenges can / cannot do. This will help determine, in worst-case scenarios, [the] next steps, including determining their fitness to work short or long term in their positions.” |

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| **Theme** | **Need for more meaningful information about functional limitations** |
| **Description** | A common issue is that the completed form often does not provide meaningful information about the employee’s functional limitations, or it recommends accommodations or solutions without adequately explaining why they are required and in what circumstances (context). If this distinction is important for the decision about an accommodation, it needs to be clarified so doctors can provide the desired information. |
| **Example quotes** | * “The reality is that we never get a note with restrictions, we only get notes with the expected outcome. Even going back and forth with the medical practitioner seems to yield minimal information.” * “In my experience, physicians always (100% of the time) go beyond their mandate of describing the functional limitations associated with a disability and take it upon themselves to recommend particular accommodations with little to no understanding of the workplace context. It is not helpful for physicians, advocating on behalf of their patients, to recommend accommodations that are not practical or workable.” * “More clarity around medical restrictions right on the document. Most doctors simply provide a recommendation and not medical restrictions.” |

|  |  |
| --- | --- |
| **Theme** | **Clarify when certificates are necessary** |
| **Description** | A common suggestion is more guidance regarding which circumstances require a medical certificate and when accommodations can be addressed without one. Many supervisors also state that more trust should be placed in employees requesting accommodations instead of always demanding evidence, as this is an additional burden and damages the feeling of trust. |
| **Example quotes** | * “Make it clear when a medical certificate is required. Also, while I understand that there can be concerns of abuse, adopt a trusting attitude. For example, the need for a medical certificate does not need to be presented as a need for proof of a condition (implying that the employee is misinformed or lying), but rather as a need to properly understand the nature of the issue in order to be able to identify the best possible accommodation.” * “Clear guidance on the types of requests that require a medical certificate versus those that can be accommodated without. A medical certificate costs the employee money, and in some cases, we can make adjustments without one.” * “Providing a medical certificate is not so much the issue as the attitude of a lot of management that employees who request accommodations are trying to get away with something, and a medical note is the only way they can prove that they aren’t lying. This attitude and culture need to change before we can think about changing or improving the medical certificate requirement.” |

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| **Theme** | **Certificates are unnecessary** |
| **Description** | Some supervisors feel that certificates are almost never necessary and a “yes by default” approach should be more common. The reasons for this include the time and expense of obtaining the certificates, trusting that employees know what they need, and the feeling that patients can ultimately dictate what the note will contain anyway. |
| **Example quotes** | * “Not having a medical certificate should not be the reason for denying one the right to be accommodated under the [*Canadian Human Rights Act*]. Many people don’t have a doctor, or don’t have easy access to a doctor. In most cases, open and honest dialogue between the employee and manager could effectively lead to a reasonable and appropriate accommodation plan, without having to oblige the employee to consult with their doctor, which can lead to additional stress, delays and avoidable hardship for all involved.” * “Medical certificates in some cases are an unnecessary waste of time and expense. If someone has chronic pain from using a mouse and requests a keyboard with an integrated touchpad, they will tell a medical practitioner who will write them a note requesting an ergonomic assessment. The assessor will then make the recommendation that the employee already knows is needed.” * “I would recommend a ‘yes by default’ approach to accommodations that relies on trust between manager and employee. In the situations I have faced, this approach has worked well.” |

### Formal assessments

The majority of supervisors (70%) have had employees who were required to get a formal assessment as part of their accommodation request, the most common being fitness-to-work (57%) and ergonomic (53%) assessments. Fewer than one in five (18%) have experience with another type of formal assessment requirement.

**Table 67: requirement for employees to participate in a formal assessment and type**

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| **Q17. Have any of your employees who requested accommodation been required to participate in a formal assessment by a medical doctor or specialist?**  **Q18. Which of the following types of formal assessment were requested for any of your employees who requested an accommodation?** | **Total supervisor sample (n=178)** |
| **Yes, employees have been required to participate in any formal assessment** | **70%** |
| Fitness-to-work assessment requested for an employee | 57% |
| Ergonomic assessment requested for an employee | 53% |
| Another type of formal assessment requested for an employee (for example, neuropsychological or psychological assessment, Independent Medical Examination (IME) and other assessments by their family doctor or a specialist) | 18% |
| **No, employees have not been required to participate in a formal assessment** | **24%** |
| **Not sure** | **5%** |
| **I prefer not to answer** | **1%** |
| Base: all supervisors  n = number of respondents | |

The proportion of supervisors with experience with formal assessments, and the types of assessments required of their employees, are consistent regardless of age, gender, region and executive / non-executive status.

Supervisors were asked for suggestions on how to change or improve the formal assessment process. The results are grouped into themes below.

#### Q16. From what you know or have heard, what suggestions, if any, do you have about how to change or improve the formal assessment process that would lead to better accommodation outcomes?

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| **Theme** | **Streamline and speed up the process** |
| **Description** | A common concern is that it takes too long to conduct assessments, and this delays the process. Some suggest a more streamlined approach, while others propose foregoing assessments and instead automatically providing the accommodations in certain situations. |
| **Example quotes** | * “The current time frames for a [fitness-to-work evaluation] can be [more than] 6 months in some regions. This means that the employee is either off on [sick leave with pay] or [sick leave without pay] that results in moving into [short-term disability] or [long-term disability] while they are waiting for assessment. This needs to be streamlined and timelines for completion clearly set out for managers who are trying to support their employees.” * “Streamline the process to be assessed. It can take so long, and while you wait, the employee may be suffering in the workplace.” * “Ergonomic equipment should be automatically granted if requested rather than requiring a medical assessment. If not the chairs, then at minimum a keyboard and mouse. A standard keyboard and mouse will definitely cause injury for full-time employees over the span of years.” |

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| **Theme** | **Provide ergonomic equipment without requiring a doctor’s assessment** |
| **Description** | Some supervisors explained that, because ergonomic assessments present only recommendations, the current process requires that employees also obtain evidence from a doctor about functional limitations before their accommodation request can be approved. It is suggested that ergonomic assessments be considered sufficient evidence to receive an accommodation and that conducting these ergonomic assessments internally would save time and money by streamlining the process. |
| **Example quotes** | * “An employee had been assessed by an ergonomic consultant paid by the insurance company, but had to wait for limitations by the doctor, who referred to the report of the ergo [consultant] to proceed. It was going around in circles and was inefficient.” * “There is simply total and mass confusion around ergonomic assessments and how the results lead to implementing or supporting accommodations measures. For the majority of assessments, [an ergonomic assessment] is meaningless in that the report is just recommendations, so often an employee **still** needs to get a doctor’s note **after** the ergo [assessment] to say what **must** be put in place. And, if the employee has no functional limitations, then it’s not considered accommodation at all.” * “Utilize in-house tools (internal ergo [assessment]) prior to requesting formal assessment. If accommodations can be met through internal ergo assessments, the process will be shortened and will not be as costly as external sources.” |

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| **Theme** | **Replace or refine the Occupational Fitness Assessment Form (OFAF)** |
| **Description** | Some supervisors view the Occupational Fitness Assessment Form (OFAF) as being too long and, because doctors are not familiar with the workplace (outside of a work description), they often rely on employees for that information when filling it in. Suggestions include pre-populating some information about the workplace and position in the form and either revamping the existing form or creating a new and simpler one. |
| **Example quotes** | * “The OFAF form is very wordy and not in plain language. Doctors who fill that out do not understand the accommodation process and usually rely on their patient for majority of the information.” * “Generally, the OFAF is very large and cumbersome. I know all the information is needed, but we have taken to generating some pre-populated versions to make it more consistent and beneficial as most jobs have similar requirements in the agency, with only some minor additions / changes.” * “The OFAF form is out of date and unclear. There needs to be a revamp – preferably by field offices who actually work with it to make it clearer.” |

## 4. Decision and outcome phase

### Approval of accommodation requests

Almost all supervisors have had employee requests that were approved, but there are many challenges during implementation, including the time and paperwork involved, funding, and accommodations that were different from requested and did not meet employee needs. Factors that contribute to successful implementation include open communication, access to helpful advice and positive attitudes toward the request.

Almost all supervisors (96%) have had experience with at least one employee request that was ultimately approved.

**Table 68: approval of accommodation requests**

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| **Q19. Have you ever had an employee with an accommodation request that was approved?** | **Total supervisor sample (n=178)** |
| Yes | 96% |
| No | 3% |
| I prefer not to answer | 1% |
| Base: all supervisors  n = number of respondents | |

Most supervisors in every demographic and professional group have had experience with an accommodation request that was approved, but it is slightly less common among supervisors who have only one request in the past three years (76%). There is also no significant difference between executive and non-executives.

### Challenges and successes in the implementation phase

Supervisors report many challenges during the implementation phase, including the time and paperwork involved, funding and accommodations that don’t meet employees’ needs. The tables below summarize the results.

#### Q20. What problems or challenges, if any, have you encountered in the implementation of approved accommodations?

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| **Theme** | **Length of time to implement accommodation** |
| **Description** | The amount of time it takes to have an approved accommodation implemented is a major challenge. Some supervisors cite delays in the procurement process such as finding and receiving the necessary equipment, waiting for approvals, and challenges with contractors installing them promptly and properly. Delays are described for both large projects that involve structural changes to buildings as well as minor accommodations that involve single pieces of computer equipment. |
| **Example quotes** | * “The significant delays in obtaining equipment such as desks and chairs. These often take weeks to obtain, and since there is a moratorium on furniture purchases, we are often arguing with procurement that it’s for an accommodation to get it through. Even then it’s unreasonably long, considering the employee now has an accommodation and medically requires that equipment.” * “Unreasonable delays in procuring technology and equipment, including the most mundane, like a new mouse.” * “Ongoing support of adaptive technology as in-house systems change, are updated, or age. Delays in having work done to modify elements of the workplace to appropriately accommodate those with physical (difficulties). These can be caused by contracting rules, contractor delays, issues with funding approvals, or simply those responsible not understanding the accommodation requirements.” |

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| **Theme** | **Actual accommodation does not match requested accommodation** |
| **Description** | Another challenge that supervisors identify is when the accommodation that the government is willing to provide does not correspond with what was requested by the employee. This may mean different equipment than what was originally requested; however, in more extreme cases, it may mean employees are asked to change position or location. |
| **Example quotes** | * “There have been a few that have only been partial accommodations, and while it lessened the challenge for employees, they were ultimately required to work remotely more often as the stress of the environment would be debilitating.” * “The employee was not willing to accept the accommodations being made available to them by management. For example, the accommodations recommended by the medical assessment could not be done in the employee’s current job position and still meet the job requirements. Multiple alternative job positions were offered that involved different workload and/or a decrease in pay. The employee refused the accommodations being offered and expressed their desire to remain in their current job position, insisting that management had to adjust the job requirements in order to accommodate them.” |
| **Theme** | **Balancing the accommodation with workplace operations** |
| **Description** | Another common challenge is balancing accommodations with the operational workplace environment. Some accommodations require reduced work hours or not performing tasks that are essential to the job itself, resulting in fewer workplace resources available to the manager. |
| **Example quotes** | * “Operational environment is such that some accommodation measures may not be available to management (e.g., cubicle footprints may not accommodate specific equipment needs).” * “Once the accommodation is approved, the hardships that can be encountered by the Unit can become quite daunting. An example would be: medical condition requires employee to work 5-hour days due to illness, which causes fatigue. Resources are lost for part days … yet the work still needs to get done.” * “Difficulty in responding to the demand, for example, cannot talk on the phone or use a computer more than 50% of the day, or cannot be stressed at work.” |

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| **Theme** | **Funding for the accommodation** |
| **Description** | Some supervisors describe concerns about whether the funding would be available to implement the accommodation and disagreements over who or which fund would pay for it. |
| **Example quotes** | * “Lack of funding for unexpected accommodations requirements. Centralized funding to address would be beneficial.” * “Deciding who pays for items to facilitate accommodation (detachment vs. city).” * “The additional costs for accommodation were not planned or budgeted for.” * “The question of who was going to pay for the accommodation came up.” |

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| **Theme** | **Cumbersome process** |
| **Description** | Another common challenge is the amount of paperwork involved in getting the accommodation implemented. This is often described as confusing and involves lengthy IT processes and challenges using the existing procurement rules to find and acquire the necessary equipment. |
| **Example quotes** | * “The onerous amount of work my organization creates via paperwork and forms in order to make this happen.” * “The cumbersome administrative process and the lack of expertise in order to be supported so that the employee benefits as quickly as possible from the necessary adaptation to his condition.” * “Unknown, complex and time-consuming process for IT tools with Shared Service[s].” * “Challenges of finding equipment and materials that will work. There is no catalogue to purchase from.” |

Supervisors were also asked about things that went well during the implementation of an approved accommodation. These include open communication, helpful advice and positive attitudes toward the request, although some couldn’t point to anything that went right.

#### Q21. What, if anything, did you feel went well during the implementation of approved accommodations?

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| **Theme** | **The ultimate success of the accommodation** |
| **Description** | A common example of what worked well was the ultimate success of the accommodation in aiding the employee. Regardless of challenges throughout the process, when the accommodation is successfully implemented, it results in increased morale and productivity from the employee. |
| **Example quotes** | * “Ultimately for the employee they do get their needs addressed, where possible.” * “The employee and employer were satisfied with the accommodation measures implemented, and the employee’s performance improved.” * “The end result was good for both of the employees.” |

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| **Theme** | **When all parties communicate well with each other** |
| **Description** | Some supervisors describe cases where there was open and ongoing communication as leading to a more positive outcome for everyone involved. When all parties are “on the same page” in terms of the approach and have realistic expectations of the outcome of the process, implementation goes more smoothly. |
| **Example quotes** | * “When all parties can agree on the planned approach (employee, management, HR) then the implementation can go smoothly.” * “My employees have all been really willing to try different options, discuss possible options, get a medical assessment or suggestions from a specialist, etc. And they weren’t afraid to tell me what they needed and ask for it.” * “Open and honest communication, solid medical information, and an accommodation that is reasonable compared to existing job description.” * “Regular communication with all parties. Written plans (expectations are clear) and implementing regular review periods.” |

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| **Theme** | **Helpful advice / support** |
| **Description** | Supervisors explain that often the advice and assistance they received from others (that is, functional experts) was very helpful in navigating the process and providing a successful outcome. |
| **Example quotes** | * “Excellent advice from my accommodation specialist.” * “As stated earlier, obtaining assistance from knowledgeable and understanding advisors makes the manager’s job easier.” * “The knowledge and suggestions from advisors are very helpful.” |

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| **Theme** | **Supervisor attitudes** |
| **Description** | Some supervisors stressed the value in displaying a respectful, open, trusting and empathetic attitude toward the employee and their request. |
| **Example quotes** | * “Listening to employees and showing compassion motivates the employee because they feel respected.” * “Being empathetic to the employee during the process, building trust that they can contribute value and being there to help them implement the accommodation.” * “Trust, respect, dignity, open dialogue, transparent process.” |

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| **Theme** | **Nothing went well** |
| **Description** | A number of supervisors say that nothing in the accommodation process went well and describe it as difficult and time-consuming for them and their employee. |
| **Example quotes** | * “Process has been long and complicated. Nothing was easy.” * “Not much. It was a struggle.” * “Nothing really – it was traumatic for the employee to go through this process and reveal their condition to numerous individuals who developed misconceived notions of the employee.” |

### Denial of request

Three in ten supervisors have experience with an accommodation request that was denied. The most common reasons for denial include insufficient evidence of medical necessity and operational requirements that make the accommodation difficult to implement.

Supervisors were also asked whether they had experience with an employee accommodation request that was denied. Three in ten (29%) have had experience with this situation.

**Table 69: any employee accommodation requests that were denied**

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| **Q22. Have you ever had an employee with an accommodation request that was denied?** | **Total supervisor sample (n=178)** |
| Yes | 29% |
| No | 69% |
| I prefer not to answer | 2% |
| Base: all supervisors  n = number of respondents | |

Similar to supervisors who have experience with accommodation requests that were approved, the only salient variable, demographic or otherwise, impacting experience with denials is the number of different requests with which the supervisor has experience: those who have been involved in four or more requests in the past three years are more likely to have experience with a denial (40%).

Supervisors with experience with denied requests were asked about the most common reasons for the denial, in their experience. Supervisors say it is often due to insufficient evidence of medical necessity or operational requirements that make them difficult to implement. The results are grouped into themes below.

#### Q23. In your experience, what are the 1 or 2 most common reasons why an accommodation request is denied?

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| **Theme** | **Lack of medical necessity for accommodation** |
| **Description** | A common reason for request denial is that the medical and/or other evidence provided by the employee did not adequately demonstrate that functional limitations exist or did not justify the requested accommodation. |
| **Example quotes** | * “No limitations or restrictions precluding work in the workplace – whole goal was telework in one and part-time work in the other.” * “Physician or assessor determined that the accommodation was not required; no physical / mental / emotional deficits.” * “There is not enough information provided to manager to make a determination whether a workplace accommodation is required – what the restrictions or needs of the employee are.” |

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| **Theme** | **Confusing a “want” for a “need”** |
| **Description** | Some supervisors explain that, because current guidelines indicate that accommodations must be based on functional limitations, denials occur when a request is perceived as a “want” instead of a need. |
| **Example quotes** | * “A misunderstanding on the part of the employee about what constitutes an accommodation request versus a recommendation from a medical practitioner.” * “The employee stated a preferred accommodation, but there were either no medical restrictions / limitations or the ones present did not support that choice (e.g., ‘I would like to work from home as I find the commute to work stressful’).” |

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| **Theme** | **Operational requirements or limitations** |
| **Description** | In some cases, supervisors perceive that it is not possible to accommodate the employee within their current position based on their functional limitations. This may be due to conflict with other requirements (for example, security requirements when using a laptop) or core job functions (for example, limitations include activities that are a requirement for performing the work) or because it would negatively affect the organizational workflow. |
| **Example quotes** | * “The accommodation request cannot be approved due to the job requirements of the employee’s current position, and the request provided by the medical professional would provide too much control over workload and job performance to the employee rather than management with uncertain outcomes.” * “A common reason for denial is that the unit’s work outputs would be negatively impacted (i.e., no one at work at critical or high demand times), thus directly impacting clients.” * “Bona fide operational requirements.” |

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| **Theme** | **Unwillingness to accept alternate accommodations** |
| **Description** | In other cases, employees may be offered alternate accommodations or arrangements that are different than originally requested (including a change of position or location), which employees are often unwilling to accept. |
| **Example quotes** | * “The most common reason for denial in our unit is due to the employee’s lack of understanding that they must be flexible, and it’s not just based on their demand. Largely, this has occurred when there isn’t evidence (aside from personal choices) that an accommodation is needed.” * “The employee wants a specific workplace accommodation and is not willing to consider any alternatives that would fit their need / restrictions.” * “The employee does not want to [change] job locations for convenience purposes. A move to a different work site would mean a personal change of residence for the employee. The employee was totally unreasonable.” |

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| **Theme** | **Management concerns / perceptions** |
| **Description** | Some supervisors describe situations where employees were denied accommodations because of fear among management that it would set a precedent or because they viewed the employee as a “trouble employee.” |
| **Example quotes** | * “Fear of precedence. Concern about an employee working remotely – individuals who are micromanagers and want to control everything.” * “Management doesn’t want to action any accommodation for a specific employee that they feel is ‘causing trouble.’” |

### Support for supervisors managing accommodation requests

Relatively few supervisors strongly agree that they have what they need to effectively manage accommodation requests. Most feel supported by their direct supervisor but somewhat less so by senior management. Suggestions for additional resources or support include a more consistent or centralized accommodation process, step-by-step instructions, and greater access to information and experts.

Two thirds of supervisors agree that they have what they need to effectively manage accommodation requests, although only one in five (20%) strongly agree. The remaining third (34%) disagree that they have the necessary resources.

**Table 70: have what they need to effectively manage employee accommodation requests**

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| **Q24. To what extent do you agree or disagree that you have what you need as a supervisor to effectively manage employee accommodation requests?** | **Total supervisor sample (n=178)** |
| Strongly agree | 20% |
| Somewhat agree | 46% |
| Somewhat disagree | 21% |
| Strongly disagree | 13% |
| I prefer not to answer | 1% |
| Base: all supervisors  n = number of respondents | |

Overall agreement that they have sufficient resources to effectively manage accommodation requests is higher among supervisors whose first language is French (77% as compared to 61% of English speakers) and executives (82% as compared to 62% of non-executives).

A large majority of supervisors feel supported by their direct supervisor when dealing with requests (85%, including 52% who feel strongly supported). Somewhat fewer feel the same degree of support from senior management (74% overall, including 35% very supported); almost a quarter (23%) say they do not feel supported by senior management when dealing with employee accommodation requests.

**Table 71: support from direct supervisor and senior management when dealing with accommodation requests**

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| **Q25. When dealing with employee accommodation requests, to what extent do you feel supported by your direct supervisor?**  **Q26. When dealing with employee accommodation requests, to what extent do you feel supported by your senior management?** | **Support from direct supervisor** | **Support from senior management** | |
| Very supported | 52% | 35% | |
| Somewhat supported | 33% | 39% | |
| Not very supported | 10% | 17% | |
| Not at all supported | 4% | 6% | |
| I prefer not to answer | 2% | 3% | |
| Base: all supervisors, n=178  n = number of respondents | | |  |

Supervisors in the National Capital Region report the lowest levels of support from their direct supervisors (74%) of all regions. Otherwise, reported levels of support from direct supervisors or senior management do not differ meaningfully by gender, language, experience with accommodation requests in the past three years or whether or not the supervisor is an executive.

### Other resources to support supervisors

Respondents were asked whether there are any other resources they would like to have to help them more effectively navigate the accommodation process. Suggestions included a more consistent or centralized accommodation process, step-by-step instructions, and greater access to information and experts.

**Q33. Is there any other information, resources or support you would like to have, or change you would like to see, to help you more effectively navigate the accommodation request process?**

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| --- | --- |
| **Theme** | **Step-by-step instructions** |
| **Example quotes** | * “There should be more step-by-step instructions for team leaders, managers and LR in order to streamline the process.” * “A step-by-step process document that is easy to follow and reduces unnecessary steps and approvals.” |

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| **Theme** | **Better access to experts** |
| **Example quotes** | * “Someone knowledgeable on this topic with whom we could talk in person, instead of trying to navigate and interpret the various laws and policies.” * “I would like to have access to specialists such as occupational therapist[s], mental health specialists, physio, etc. that can confirm the best approaches.” |

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| **Theme** | **More centralized approach** |
| **Example quotes** | * “I think that a more centralized approach … would ensure uniformity.” * “There should be a specialist dealing with all accommodations. This would be more efficient because accommodation requests are relatively rare. Why should each team leader be forced to learn or relearn all of the related HR procedures once every year or two?” |

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| **Theme** | **More and/or better informational resources** |
| **Example quotes** | * “A proper Infoweb or portal that outlines the process, a properly staffed disability management unit where employees and supervisors can obtain responses in a timely manner.” * “Redo the TBS website and update the info on the Disability Management Tool and Managers / Employee Handbook tools on the website to reflect current information.” |

### Functional area leading accommodation requests

Labour Relations is the functional area that most commonly leads the process for accommodation requests, but there is no consensus on who should lead requests; there is a suggestion that a specialized team would be a good idea. Only six in ten report that the decision to approve requests is the responsibility of the employee’s direct supervisor or senior management and, although some feel it should stay with them, others feel it should be made at a higher level. Four in ten supervisors do not know where funding for accommodations comes from, but manager budgets are the commonly cited source. Some suggest that funding should also come from a central fund.

When asked who leads the accommodation request process in their department, supervisors mention a variety of functional areas, but the single most common answer is Labour Relations (34%). Other areas mentioned include Human Resources (19%), a disability management unit (10%) and the department’s senior management (7%). More than one in ten respondents (13%) say they did not know which area leads the accommodation request process.

**Table 72: functional area that leads accommodation requests for department**

|  |  |
| --- | --- |
| **Q27. Which functional area leads the accommodation request process in your department?** | **Total supervisor sample (n=178)** |
| Labour relations | 34% |
| Human resources | 19% |
| Disability management unit | 10% |
| Department’s senior management | 7% |
| Other (including direct supervisor and admin / facilities) | 17% |
| I do not know | 13% |
| Base: all supervisors  n = number of respondents | |

Supervisors were asked which functional areas they feel should be leading accommodation requests in their department. There is no consensus, but some suggest the need for a team that specializes in the process. The most common response themes are grouped together below.

#### Q30. In your opinion, which functional area in your department should lead the accommodation process?

|  |  |
| --- | --- |
| **Theme** | **Human resources** |
| **Example quotes** | * “HR staff who are experts on the matter in consultation with direct supervisor.” * “Human Resources – our managers are not well equipped to understand all the necessary documents [and] steps that are required.” |

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| **Theme** | **A centralized and/or specialized team** |
| **Example quotes** | * “A centralized disability management unit would significantly improve consistency.” * “A specific regional team, who knows each of the sites well, could do the assessments.” |

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| **Theme** | **Disability Management** |
| **Example quotes** | * “Disability Management or a separate area that can provide guidance for **all** types of accommodations.” |

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| **Theme** | **Labour Relations** |
| **Example quotes** | * “At [my department], Labour Relations should lead the accommodations process.” |

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| **Theme** | **Direct manager** |
| **Example quotes** | * “The manager, as they are closest to, and most informed about, the employee’s work.” * “I believe the employee’s direct supervisor should lead the process, but they require support from a specialized unit that provides support.” |

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| **Theme** | **Senior management** |
| **Example quotes** | * “Senior management should have final say and lead the process.” |

### Source of ultimate decision to approve or deny accommodation requests

When it comes to the ultimate decision-making power to approve or deny accommodation requests, supervisors are most likely to say that this responsibility lies with them (as the employee’s immediate manager) (31%) or with senior management (28%). Fewer say the decision rests with accommodations staff or the human resources unit (6%) or Labour Relations (5%). More than one in ten supervisors (13%) are unaware of who makes the ultimate decision.

**Table 73: source of decision to approve or deny accommodation requests for department**

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| --- | --- |
| **Q29. In your department, who generally makes the ultimate decision to approve or not approve an accommodation request?** | **Total supervisor sample (n=178)** |
| You (the employee’s immediate manager) | 31% |
| Senior management | 28% |
| Accommodations staff or human resources unit | 6% |
| Labour relations advisor | 5% |
| Facility or property management | 1% |
| Other | 16% |
| I do not know | 13% |
| Base: all supervisors  n = number of respondents | |

Men are more likely than women to say that they themselves ultimately make the decision about approval (39% as compared to 24% of women), as are executives (54% as compared to 26% of non-executives). The proportion who say senior management makes the final decision is higher among supervisors whose first language is English (34% as compared to 15% who are French speaking). Supervisors in the National Capital Region are more likely than those in most other regions to say they don’t know who makes the decisions (25%).

Respondents were asked which functional areas they feel should have the power to make decisions about approving or denying accommodation requests. There is no consensus, with some who feel the decision should remain with the direct supervisor or manager, while others feel it should be made at a higher level. The most common response themes are grouped together below.

#### Q32. In your opinion, at what level in the organization should accommodation requests be approved or denied?

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| **Theme** | **Direct supervisor / manager** |
| **Example quotes** | * “At the manager level – just a regular part of providing employees with the tools needed to do their jobs.” * “At the working level, direct supervisor.” |

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| **Theme** | **Some level above direct supervisor** |
| **Example quotes** | * “At least one level above the immediate manager / supervisor.” * “ADM level. They would see how many people within the organization have disabilities. I don’t think it is known right now because it is buried deep down in the organizations. Nobody is working together because nobody knows how many are having issues.” * “The supervisor of the immediate supervisor of the employee.” |

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| **Theme** | **Senior management** |
| **Example quotes** | * “Senior management of the local division / location, as they best understand the work required of the job and how to possibly implement any accommodation request based on business needs or requirements.” * “Senior management, along with central accommodations team, ensures consistency.” |

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| --- | --- |
| **Theme** | **Depends** |
| **Example quotes** | * “That depends on where you want to place accountability. I can make reasonable accommodations if it’s operationally feasible, and I can manage any incurred costs. But if someone has an ergo assessment that tells me they need expensive equipment, I currently have no choice but to make the purchase. This indicates a disconnect between approval and accountability.” * “There should be a level of approval, like any other decision, that would be based on the organizational and functional impact of the accommodation request (staffing, expenses, etc.).” |

### Funding of accommodations within department

Respondents were asked about the source of funding for accommodation requests in their department. The most common single source selected (from the list provided) is the budgets of working-level managers (39%). Fewer rely upon a central fund within their department (15%) or the budgets of senior-level managers (13%). Almost four in ten responding supervisors admit they do not know the source of funding within their department (38%).

**Table 74: funding source for accommodations in department**

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| --- | --- |
| **Q28. In your department, where does the funding for accommodation requests come from?** | **Total supervisor sample (n=178)** |
| The budgets of working-level managers | 39% |
| A central fund within your department | 15% |
| The budgets of senior-level managers | 13% |
| Other | 7% |
| I do not know | 38% |
| Base: all supervisors  Note: respondents could choose multiple responses  n = number of respondents | |

The reported source of funding for accommodation requests does not vary by gender, age, region or language. Executives (68%) are more likely than non-executives to say that the funding comes from the budgets of working-level managers. In turn, non-executives, as well as those with less experience handling accommodation requests and those who say someone other than themselves makes the ultimate decision, are all more likely to say that they are unaware of the source of funding.

Respondents were asked where they feel that funding for accommodation requests should come from. While there is no consensus, many suggest the need for a central fund. The most common response themes are grouped together below.

#### Q31. In your opinion, where should the funding for accommodation requests come from?

|  |  |
| --- | --- |
| **Theme** | **A central fund** |
| **Example quotes** | * “A central fund aside from departmental budgets. We have a duty to accommodate, [and] that duty should be funded separately.” * “Central funding – it is impossible for a manager to accurately budget for this as we are unable to anticipate accommodation requests. Also, if approving costs is a barrier, then remove that barrier locally.” * “We should have accommodation funds that are not linked to any other operational or salary funds. The government should have it available for all divisions.” |

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| --- | --- |
| **Theme** | **Manager’s budget** |
| **Example quotes** | * “The employee’s direct manager.” * “If it’s entirely up to the manager, then it makes sense that it comes from the individual manager’s budget. But if you’re going to force us to undertake an ergonomic assessment that we are obligated to implement, then it should come from a central budget (departmental or federal).” |

|  |  |
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| **Theme** | **Depends on the amount** |
| **Example quotes** | * “Depends on the cost. Anything over $5,000 should come from a Government of Canada fund. Departments are given minimal budgets to meet program objectives. One large accommodation could derail an entire program or office.” |

### Performance evaluation for employees with disabilities

Some supervisors feel the existing performance evaluation process is appropriate for employees with disabilities, while others feel adjustments should be made in those cases.

Supervisors were asked for their views about how the employee performance system works for employees with disabilities, particularly in terms of what needs to be improved or changed. There are two main viewpoints: some supervisors feel that the existing system for evaluating performance is appropriate for employees with disabilities, while others feel that the performance evaluation process should be adjusted in those cases.

#### Q34. We’d like your thoughts on how the employee performance evaluation process works for employees with disabilities, for example, in terms of how their performance objectives are established or how their results or competencies are assessed. In your view, what, if anything, needs to be improved or changed?

|  |  |
| --- | --- |
| **Theme** | **Should all have the same performance evaluation process** |
| **Description** | Some supervisors say disabilities should not influence performance evaluations because accommodations allow for the opportunity to complete the work as well as their peers, and it is employee’s output that is being evaluated. They feel that changes are not needed in most cases. |
| **Example quotes** | * “Employee evaluation does not need to change. It is done in accordance with their medical or restrictions profile. They should not be disadvantaged.” * “No changes required in my opinion. If the accommodation is reduced working hours, you have to manage the outputs to be in line. Competencies shouldn’t be affected; you still have to be a good employee and meet the values and ethics like everyone else.” * “Not really. In most cases, we are able to accommodate in their current job thus the objectives remain the same. Where there is an adjustment [it] is often simply for additional breaks.” |

|  |  |
| --- | --- |
| **Theme** | **Adjustments should be made to the evaluation process when evaluating employees with disabilities** |
| **Description** | Others perceive a need to adjust the evaluation process when employees with disabilities are involved. Some suggest that performance expectations be modified for all employees with disabilities based on their documented limitations, and that individual assessment criteria should be re-evaluated after an accommodation is in place. Others suggest training on how to make these adjustments to evaluation criteria for employees with disabilities, and implementing a system that ensures that anyone evaluating performance is aware of previously documented accommodations. |
| **Example quotes** | * “Assessment should be based on what the employee can do. Assessment should be made after an accommodation is in place.” * “Performance expectations should be modified for all employees with disabilities (where disclosed) based on the [restrictions and limitations] provided by their physician. More support is needed for management in completing this task, and HR support for this activity should be automatically initiated when an accommodation request is being supported by HR.” * “Sometimes, the performance evaluation report is completed by someone who has forgotten that the employee has a disability. Perhaps have an accommodation check box or some other identifier or reminder to the, for example, team leader **before** the team leader fills out [an employee’s performance report / assessment].” |

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| **Theme** | **Changes to the system at large** |
| **Description** | A general discontent with the existing system for all employees (those with disabilities or otherwise) is also expressed by some supervisors who feel that it is cumbersome and inconsistent. |
| **Example quotes** | * “The current [public service performance management] program is cumbersome and completed inconsistently. Overall, I have not found it to provide an accurate description of performance, particularly when there are performance issues that require increased supervision and/or action plans.” * “I am not a huge fan of the existing performance management practices, so it works as [badly] for the person with disability as for everyone else.” * “The employee performance evaluation is ineffective for all employees, including employees with disabilities.” |

|  |  |
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| **Theme** | **Difficulties evaluating teleworkers** |
| **Description** | Some supervisors describe difficulties in accurately and consistently evaluating employees who work from home most or all the time. Because persons with disabilities may require telework as part of their accommodations, supervisors may experience these difficulties more often with employees accommodated in this manner due to a lack of direct contact. |
| **Example quotes** | * “Performance evaluation for employees working from home is very challenging, particularly when the employee has attendance issues, but senior management has approved it anyway and left you to deal with it.” |

## 5. Key messages

### Key messages for senior management

The messages that supervisors have for senior management include: to appreciate the time-consuming nature of accommodation requests and the negative impacts for both supervisors and employees; to trust and show compassion to employees making accommodation requests; to provide supervisors with more training; and to play a larger role in accommodation requests.

#### Q35. What 1 or 2 key things would you like senior management to know about the accommodation process that you feel would result in it working better for everyone?

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| **Theme** | **Amount of time and effort required to navigate process** |
| **Description** | A common message is having senior management understand how much time supervisors spend administering these requests in addition to how much time employees spend navigating the process. This is often coupled with the desire to express how complicated, cumbersome and time-consuming the process for accommodation is and how it could be simplified. |
| **Example quotes** | * “Recognition of how much time and effort is involved in determining appropriate accommodations for employees. Being more cognizant of what is actually involved in accommodating employees and offering appropriate support and advice to managers / supervisors on a timely basis.” * “Depending on the type of accommodation, it often takes a lot of time for the manager to administer.” * “The accommodations process is too slow. It discourages people from speaking up and asking for accommodations, and it discourages managers from hiring people with disabilities.” |

|  |  |
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| **Theme** | **Trust employees and show compassion** |
| **Description** | Another common theme is that more trust and compassion should be shown toward employees. Supervisors suggest the default attitude of senior management is often that employees are looking for special treatment. A more positive approach to accommodation would improve outcomes by giving more employees the tools they need to succeed. |
| **Example quotes** | * “Remove all cynicism and adopt an attitude of trust in the employees making the requests. Make this a positive experience for the majority of people properly using the system. When you help someone who is in this vulnerable situation, you have the opportunity to gain tremendous engagement. And it is just the right thing to do.” * “There is enough literature and case law to lead a reasonable person to understand the importance and benefits of an inclusive, equal opportunity workforce, as well as the risks of failing in the duty to accommodate (DTA). By demonstrating inclusiveness and embracing diversity, including DTA, at a senior leadership level, it will be reflected in the workforce. DTA should not be a bureaucratic process, it is a human right.” * “As with our move to bring decision-making, authority and efficiency to the delivery of services to clients, so too should we consider the same approach when caring for the needs of our employees.” * “I think that they need to support it without having to doubt the motives of the employee every time. It would be great to have a conversation about it instead of them talking about how the employee is shirking their duties or how precedence will be set.” |

|  |  |
| --- | --- |
| **Theme** | **Play a larger role in accommodations** |
| **Description** | Senior management should play a larger role by providing: more guidance about what should and should not be covered in accommodations, having a centralized fund for accommodations, providing cross-departmental support or resources where it is necessary to find alternative positions for accommodated employees, and responding more promptly when their personal input is required for a request. |
| **Example quotes** | * “Senior management should take a centralized, whole-of-government approach. If a person cannot be accommodated in one government department, then the person should be accommodated through a centralized all-of-government approach. Move employees between government departments.” * “I believe [there should be] a centre of expertise where you can get questions answered quickly about accommodations [and a] SharePoint site to log and track the accommodations process. This needs to include the employee being accommodated.” * “Centralize funding for accommodations.” |

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| --- | --- |
| **Theme** | **Training for supervisors** |
| **Description** | It was suggested that training about accommodations be provided for all supervisors who may have to handle requests when they start in their positions. |
| **Example quotes** | * “An information package with all information and contacts could be provided to all managers as soon as they start in a new supervisory position. This should be applicable to all areas such as HR, finance, accommodation [and] security…. Simply putting everything on the internal website does not make it easily accessible to everyone. Searching on a website does not always bring you to what you are needing.” * “[Provide] proper training and consistent instructions on how to go about an accommodation request.” * “[There is a] need for increased training and information sessions.” |

### Key messages for employees seeking accommodation

The key messages that supervisors have for employees seeking accommodation are: to understand that an accommodation is meant to address a functional limitation; to understand the process and actively participate in it; and to understand that they may not get their preferred outcome.

#### Q36. What 1 or 2 key things would you like employees who have (or are seeking) accommodations to know because you feel this knowledge would make the accommodation process work better for everyone?

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| --- | --- |
| **Theme** | **An accommodation is meant to address a functional limitation** |
| **Description** | A very common message for employees is that current guidelines require that an accommodation be demonstrably linked to a functional limitation. Some suggest it would be helpful to provide employees who are considering a request with brief documents or videos explaining criteria for an accommodation. This message may also need to be extended to co-workers to avoid perceptions of favouritism. |
| **Example quotes** | * “The employee needs to be aware that not all requests can be granted just based on a medical certificate that is vague.” * “The employee must show how the accommodation will support or assist them in achieving their work goals. Just because they want something doesn’t mean it’s an accommodation.” * “Never list the jobs that you prefer to do. This is about limitations, not preferences. It would be nice if an employee could provide some of the solutions, such as ‘if this table was long and I had a sliding chair, I believe I could still do that function.’” * “Accommodations are tools to allow employees to continue to be productive when experiencing challenges and not to grant entitlements to their co-workers.” |

|  |  |
| --- | --- |
| **Theme** | **Understand the process** |
| **Description** | A better understanding among employees of how the request process works is also seen as beneficial so that employees understand what their role and responsibilities are. It is also important that employees have a clear understanding of the purpose of medical or other evidentiary documentation so they can provide what their supervisor needs in order to approve the request. |
| **Example quotes** | * “I would like employees to read policy and understand their role and responsibility when it comes to accommodations. Maybe an information video or mobile app of some sort, where they can get FAQ and/or be educated, rather than them going to a policy manual.” * “A course outlining the accommodation process, so individuals have the knowledge. They know their co-workers and may identify a need before a supervisor does.” * “If they knew what to provide their manager / supervisor at the beginning, so as to not create delays, would be great. A site to visit or an email or phone [number] to contact when preparing themselves to make an accommodation request. And then ensuring they know who to put their request forward to, i.e., Manager / Supervisor, Disability Management, etc.” |

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| **Theme** | **Actively participate in the process** |
| **Description** | Supervisors and managers want to be open to, and actively collaborate with, employees to find a solution that is acceptable to both parties. |
| **Example quotes** | * “Be an active participant if you want it to be successful.” * “Stay positively engaged with your supervisor and document everything.” * “You need to take carriage of your accommodation and drive to get the answers and responses. It seems like [the] ultimate responsibility is on you.” * “That accommodation is a collaborative process. That employees have an obligation to inform themselves and present reasonable solutions to their management.” |

|  |  |
| --- | --- |
| **Theme** | **Employees are not guaranteed their preferred outcome** |
| **Description** | Ultimately, with the current process, the outcome could be different from what the employee preferred, or it requires a change in position or location. It is important that the employee know and understand this possibility in advance. |
| **Example quotes** | * “Understand that you will not get what you want all the time.” * “Not all requests are approved. Your rights and restrictions need to be validated and specific, and (your accommodation) has to allow for work to be completed. If it creates hardship for the unit, you may need to be accommodated elsewhere (i.e., can’t keep their current role).” |

### Employee accommodation passport

The accommodation passport concept is seen by almost all supervisors as something that would result in better outcomes for everyone.

Supervisors were asked about the accommodation passport concept that the Government of Canada is considering implementing. The passport would allow employees with an approved accommodation to transfer it when they move to other federal departments or positions. The overwhelming majority (90%) of supervisors say the accommodation passport would be very (63%) or somewhat (27%) helpful in improving accommodation outcomes for everyone.

**Table 75: how helpful the accommodation passport would be for improving outcomes**

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| --- | --- |
| **Q37. The Government of Canada is exploring the possibility of an “accommodation passport” program that would allow employees who have an approved accommodation to transfer it to another federal department or position. Although such a program would not change the initial request approval process, it would eliminate the need to apply for the same accommodation multiple times. How helpful do you feel this would be in improving accommodation outcomes for everyone?** | **Total supervisor sample (n=178)** |
| Very helpful | 63% |
| Somewhat helpful | 27% |
| Not very helpful | 7% |
| Not at all helpful | 2% |
| I prefer not to answer | 2% |
| Base: all supervisors  n = number of respondents | |

There is widespread support for an accommodation passport among supervisors, regardless of age, gender, region, language and executive / non-executive status.

# Summary of key findings and considerations

This survey deepens the understanding of how federal employees and supervisors view and experience the workplace accommodation request process. This section of the report summarizes employee and supervisor perspectives on each phase of the accommodation process (pre-request, assessment and decision / outcome), followed by the key findings from related topics (for example, career implications, harassment and discrimination, extended sick leave).

## The accommodation process

* The sample of **employees** who made at least one workplace accommodation request in the past three years was asked about the one that was most important or impactful for them. Almost all of these accommodation requests were made to address barriers related to their primary health condition or disability (84%) or to another health condition or disability (9%); only one in twenty requests were for a different reason (for example, family or religious reasons).
  + The types of health conditions and disabilities associated with the request vary widely, but the majority (63%) are permanent. In the case of their primary condition or disability, most (86%) describe it as invisible.
* The sample of **supervisors** who have managed at least one accommodation request for an employee in the past three years has limited experience with the process: 52% handled no more than one request per year on average. Three quarters have handled a request involving an invisible condition or disability.

### Pre-request phase

* **Employees consistently associate negative emotions with the period prior to submitting their accommodation request**. A common emotion associated with making a request is fear and anxiety due to concerns that a request will lead to negative repercussions, such as the negative perceptions of peers and management, and potential damage to their career prospects. Employees also report feeling devalued, embarrassed or guilty about the possibility of letting down their team.
* **These negative emotions have implications for whether, and when, employees choose to make an accommodation request**. A substantial proportion (43%) have, at some point in the past, chosen not to request an accommodation that would have improved their ability to carry out their job-related duties. Some report making their request only when they reach a “tipping point” and can no longer cope, a delay that can have negative health consequences: four in ten reported taking extended sick leave as a result of not being properly accommodated.
* **To make their decision to request an accommodation easier, employees want greater empathy and support from supervisors and senior management**. They want to be believed and trusted that they are seeking an accommodation to overcome barriers in the workplace so they can contribute to their fullest potential, not due to laziness, a lack of ability or a desire for preferential treatment. When employees encounter a lack of compassion and understanding on the part of management about their situation, it can lead to the perception of an adversarial relationship.
* **A further barrier for employees making accommodation requests is that the process itself lacks clarity.** More than half (53%) say it was difficult to find out how to start the process, including one quarter (27%) who say it was very difficult.
* **Supervisors also acknowledge some challenges associated with having conversations with their employees about workplace accommodations:** fewer than half (46%) say it is very easy to have these discussions.
* **For supervisors, other common challenges include insufficient training and support and the complexity of the process**: only one in ten find the process very clear, and only three in ten say it is very clear who to contact for help. A third of supervisors disagree that they have what they need in order to effectively manage employee accommodation requests.

### Assessment phase

* **In the assessment phase, the vast majority of employees were required to provide evidence that support their need for accommodation.** Nine in ten had to either provide a medical certificate or other evidence and/or to undergo a formal assessment, including six in ten who did both.
* **A key employee suggestion for improving the medical certificate request process is to clarify the information requirements.** Currently, a lack of clear instructions means multiple physician visits to get the necessary evidence, resulting in an onerous, time-consuming, frustrating and costly process. Another concern is managers who ignore, doubt or reject the medical advice.
* **Employee concerns about the formal assessment process** include that it is too slow and does not align with the circumstances of the accommodation request (for example, fitness-to-work assessment includes very little about mental health). Employees commonly state that the process needs to be handled by trained and impartial staff and, ultimately, that the results of the assessment need to be respected (and not disregarded).
* **Supervisors say the medical and assessment forms do not generate the intended information about functional limitations necessary to make the decision for or against an accommodation.** They suggest streamlining the process by providing guidance and clarification on when, and what, information is required from medical professionals or specialists, refining the standard forms, and removing the need for medical and/or other evidence or formal assessments altogether in certain situations, such as when an ergonomic assessment has been completed or when the employee has previously submitted evidence and/or had a similar accommodation in the past.
* Aside from specific suggestions for improving the assessment phase, **some** **employees and supervisors alike believe accommodations should not go through an approval process in the first place.** A common theme throughout the survey results is that disability-related accommodation requests should be approved by default unless there is an objectively justifiable reason to question the validity of the request.

### Decision and outcome phase

* **Among the employees participating in this survey, implementation of their requested accommodation was a reality for just under two thirds of those with approved requests.** A large majority (90%) of requests made in the past three years whose outcome is known received approval, but only six in ten (64%) of these are fully in place to date.
* **For employees, one of the main challenges associated with the decision phase is the length of time to implement the approved accommodation after it has been approved**, during which time they must continue to work without it. In some cases, the accommodation is not fully implemented or is being ignored, equipment is not functioning properly, or there is a lack of communication about the status of the accommodation. One suggestion from employees is to allow temporary accommodations so they can continue to work effectively pending the decision.
* **Supervisors identify the procurement process as a pain point**, explaining that the cumbersome nature of the process and the length of time required to have equipment installed are major hurdles. They suggest a more centralized approach to procurement for accommodation requests to reduce the length of time involved.
* **When an accommodation request is denied (8% of cases in this survey), it presents a psychological and practical problem for these employees.** Most (81%) say they were not given enough information to explain why their request was denied. They often feel that subjective factors – such as negative management perceptions of their condition or disability – played a role in the decision, confirming their initial fears when making the request. Ultimately, they often report that they are forced to make a choice about continuing to work without accommodation, going on extended sick leave, moving to another department or leaving the public service.
* **When supervisors have been involved with a request that was denied, they often cite a lack of proof of medical necessity for an accommodation** and an inability to provide the accommodation within operational limitations.

### Overall accommodation process

* **Employees express widespread dissatisfaction with the accommodation process as a whole**: six in ten (58%) are dissatisfied, and only three in ten are satisfied.
* **Both employees and supervisors find the accommodation request process complex and challenging to navigate** and would like it to be simpler, clearer and more streamlined.
* **A key suggestion made by both employees and supervisors is for a more centralized and specialized approach to accommodation requests led by neutral functional experts.** Such an approach would alleviate a number of concerns: relieve the burden (time and resources) placed on supervisors to handle requests, address employee concerns about management reprisals and privacy, and overcome the lack of training and expertise among supervisors.
* **Employees also perceive the need for an advocate** to help them navigate the process and act on their behalf with unsupportive or adversarial managers. Currently, Labour Relations is the most common departmental lead for the accommodation process (identified by one third of supervisors), but many employees expressed concerns that Labour Relations is not impartial because they primarily represent management’s interests.
* **A significant barrier identified by many employees is the need to make multiple requests or repeatedly submit medical certificates and/or other evidence for the same accommodation due to a change in their position, physical office or supervisor.** Both employees and supervisors recommend the creation of a centralized file for information related to accommodations to avoid this situation. Majorities of nine in ten of both employees and supervisors support the proposed accommodation passport program, which would allow employees to transfer an approved accommodation to other departments or positions.

## Other findings from the employee survey

### Adaptive technology

* **More than half (54%) of employee requests described in this survey involve adaptive devices, equipment, software or accessories**, the two most common being a specialized desk or chair (or an adaptation to an existing one). Four in ten employees requested more than one piece of adaptive technology as part of their request. Adaptive technology is most often a part of requests related to flexibility or dexterity issues or hearing and seeing disabilities.

### Career implications

* **Employees’ views about their future in the Government of Canada are connected to their experience with the accommodation process.** Four in ten are negative about their career prospects over the next five years due to concerns that they will be viewed as a poor candidate in the selection process or because moving positions would mean re-requesting (and possibly jeopardizing) their accommodation. Many report having opted out of a staffing process because of barriers related to their health condition or disability (49%); there is also a substantial number who feel that they have been denied a promotional opportunity due to reasons related to their condition or disability (41%). On the other hand, optimism about their federal government career is strongest among employees with an approved accommodation fully in place.

### Harassment and discrimination

* **Recent experiences of harassment (38%) and discrimination (35%) are commonly reported by employees who have made an accommodation request related to a health condition or disability**. The rates of reported harassment and discrimination in this survey are higher than those reported in the 2019 Public Service Employee Survey by people with disabilities in general (29% for harassment and 23% for discrimination).
* **Both harassment and discrimination are more widely reported by those required to provide medical or other evidence to support their accommodation request, and by those whose request was denied.** Although the research cannot prove (or disprove) causation, it does suggest a compounding effect for those seeking an accommodation.

### Extended sick leave

* **Four in ten have taken extended sick leave as a result of not being appropriately accommodated** (although not necessarily related to the accommodation request made in the past three years). This is particularly common for those facing workplace barriers due to mental health conditions. Almost a quarter (23%) of these employees remain on sick leave for more than six months, and satisfaction with the level of support upon their return is very low (16% reported being satisfied).

### Subgroups of interest

* **There is some evidence that employees with conditions or disabilities that are more readily recognizable to outside observers, such as seeing, hearing and mobility disabilities, tend to have more successful accommodation experiences**. Employees with these types of disabilities are more likely to receive approval of their accommodation request, are more satisfied with the process overall and have the most positive views about their career prospects. In turn, those whose conditions or disabilities are less easily recognizable to outside observers, such as chronic pain, mental health issues, and sensory or environmental disabilities, are more likely to be dissatisfied with the accommodation process; employees with mental health issues are also the least likely to have their request approved.
* When asked to compare “visible” to “invisible” conditions, **more than half (54%) of supervisors agree that invisible conditions make the assessment process more complex**, mainly due to the need for additional evidence and/or a formal assessment by an external doctor or specialist in these cases. It is unclear whether this increased evidence requirement and/or the resulting increase in complexity contributes to the more negative experiences reported by employees with conditions or disabilities that are less easily recognizable to outside observers.
* **Few gender-based differences were identified in this research.** The types of disabilities or conditions are largely similar for men and women, with the exception that women are more likely to cite chronic health conditions or pain and sensory / environmental disabilities, as well as to describe their condition as episodic or recurring. In terms of the assessment process, women are more likely than men to report being required to provide medical or other evidence (but are no more likely to be required to undergo a formal assessment). Women are also more likely to have taken extended sick leave at some point as a result of a condition or disability that was not appropriately accommodated, and to have chosen not to request an accommodation that would have improved their ability to carry out their job-related duties.

## Other findings from the supervisor survey

* **Relatively few supervisors strongly agree that they have what they need to effectively manage accommodation requests.** Most feel supported by their direct supervisor but many feel somewhat less supported by senior management, and many feel that the amount of time and effort required to manage accommodation requests is not fully understood or appreciated. Suggestions for additional resources or support include a more consistent or centralized accommodation process, step-by-step instructions, and greater access to information and functional experts.
* Although supervisors often cite a need for more expert advice, at the same time, **some say that doctors and specialists should provide information about functional limitations but not recommendations or advice**. Clarity regarding the role of doctors and specialists would be beneficial, as would greater support from functional experts, who could provide additional guidance beyond accommodation advice provided by doctors and specialists.
* **The single most common source of funding for accommodation requests among departments is the budgets of working-level managers** (39%). However, almost as many supervisors (38%) do not know the source of funding within their department. While there is no consensus about where the funds should come from, it is recognized that centralized funding could alleviate pressure on managers’ budgets and remove a potential barrier to approving accommodations.
* **There is also no consensus on whether the existing system for evaluating performance is appropriate for employees with disabilities** or whether it should be adjusted in those cases. However, common suggestions for improving the evaluation process include: aligning performance objectives with approved accommodations, re-evaluating individual assessment criteria and assessing performance after an accommodation is put in place, and ensuring that evaluators are aware of previously documented accommodations.

# Appendix A: Methodology

The findings presented in this report are based on data collected internally by TBS using two separate online surveys of federal public service employees designed by Environics for the Office of Public Service Accessibility (OPSA). One survey was for employees who have made an accommodation request in the past three years, and the other was for supervisors who have made requests for employees in the past three years.

## Target population and sample design

The target population consisted of people who participated in the May 2019 phase of research and asked to be contacted again for the October 2019 phase. Each employee who completed Phase 1 of the research had made an accommodation request in the past three years for themselves, and each supervisor had made a request on behalf of their employees in the same timeframe. Each respondent was invited to participate in either the employee or supervisor follow-up survey, based on their responses to the Phase 1 survey. Invitations to participate in the survey were sent directly to public servants via email, and no incentives were provided for participating.

The samples collected are non-probability samples of employees and supervisors. As a result, this sample cannot be considered representative of all federal public service employees or supervisors in the target population.

## Questionnaire design

Environics designed both survey questionnaires with input from the Treasury Board of Canada Secretariat (TBS) based on the results of the Phase 1 findings and the research objectives. The questionnaires ensured that the research objectives were met and that all questions were appropriately worded. Upon approval from TBS, the questionnaire was translated into French by TBS.

## Fieldwork

TBS conducted the online surveys and collected the data between October 22 and 29, 2019. Each survey took respondents roughly 30 minutes to complete.

A total of 838 employee surveys were completed; 35 respondents reported that they had not made a request for a workplace accommodation in the past three years, and one case was duplicated in the data set. These cases were excluded from the analysis, resulting in 802 valid respondents to the employee survey. The results in this report focus on accommodation requests that involved a health condition or disability and, unless otherwise noted, results are from this group only. This distinction was made using the results of Q7 where those who said that their accommodation was for a purpose other than a health condition or disability (such as for family or religious reasons) were not included. In total, 743 of the 802 (93%) of employee surveys involved a health condition or disability, 44 involved a request for another purpose, and 15 did not provide a response to this question.

A total of 183 supervisor surveys were completed; one respondent said that they had not supervised any employees over the past three years, and in four cases the respondent said that they had not requested any workplace accommodations for their employees in the past three years. These cases were excluded from the analysis, resulting in 178 valid respondents to the supervisor survey.

The data (survey results) was provided by TBS to Environics Research in Excel format and was first “scrubbed” by TBS to remove actual or potential identifying information to maintain the anonymity of respondents. It was then cleaned and coded by Environics to allow for statistical tabulation. Open-ended responses were collected and reviewed by Environics, and the results of all questions were analyzed and are presented in this report. The final data for both surveys are unweighted, since there is no data on the universe of federal employees who have completed an accommodation request for themselves or an employee on which to base weighting targets. No estimate of non-response bias is possible, as the characteristics of the target population is not known.

## Analysis of results

Employees who said that they experience barriers to their ability to perform tasks and activities in the workplace as a result of a health condition or deniability were also asked whether their condition or disability was visible or invisible. Results that describe the differences between those with visible and invisible conditions are based on the responses to this question (Q5).

Tables 76a to 76f summarize the key characteristics of the two samples. The employee numbers are filtered for only those whose accommodation request involved a health condition or disability (n=734). The supervisor numbers include all respondents (n=178).

**Table 76a: characteristics of the sample (executive or equivalent)**

|  |  |  |
| --- | --- | --- |
| **Response** | **Employees** | **Supervisors** |
| Yes | 1% | 16% |
| No | 97% | 83% |
| I prefer not to respond | 1% | 1% |

**Table 76b: characteristics of the sample (gender)**

|  |  |  |
| --- | --- | --- |
| **Response** | **Employees** | **Supervisors** |
| Female | 69% | 57% |
| Male | 26% | 40% |
| Other | 1% | 1% |
| Prefer not to answer | 5% | 2% |

**Table 76c: characteristics of the sample (first official language)**

|  |  |  |
| --- | --- | --- |
| **Response** | **Employees** | **Supervisors** |
| English | 72% | 69% |
| French | 23% | 27% |
| Other | 8% | 8% |
| Prefer not to say | 2% | 1% |

**Table 76d: characteristics of the sample (age)**

|  |  |  |
| --- | --- | --- |
| **Response** | **Employees** | **Supervisors** |
| 18 to 34 | 10% | 2% |
| 35 to 49 | 44% | 46% |
| 50 to 54 | 16% | 22% |
| 55 to 64 | 23% | 23% |
| 65 or older | 2% | 3% |
| Prefer not to answer | 6% | 3% |

**Table 76e: characteristics of the sample (department of employment: top responses)**

|  |  |  |
| --- | --- | --- |
| **Response** | **Employees** | **Supervisors** |
| Canada Revenue Agency | 30% | 34% |
| Correctional Service Canada | 10% | 9% |
| Canada Border Services Agency | 8% | 2% |
| Public Services and Procurement Canada | 4% | 3% |
| Employment and Social Development Canada | 4% | 4% |
| Shared Services Canada | 4% | 7% |
| National Defence | 3% | 4% |
| Royal Canadian Mounted Police | 2% | 7% |
| Innovation, Science and Economic Development Canada | 2% | 4% |
| Other | 35% | 28% |

**Table 76f: characteristics of the sample (region)**

|  |  |  |
| --- | --- | --- |
| **Response** | **Employees** | **Supervisors** |
| Atlantic | 9% | 10% |
| Quebec (outside the National Capital Region) | 4% | 6% |
| National Capital Region | 43% | 41% |
| Ontario (outside the National Capital Region) | 18% | 21% |
| Prairies and territories | 15% | 13% |
| British Columbia | 10% | 10% |

## Completion results

Total invitations sent: 1,831

* “Bounce-backs” (rejected or undeliverable invitations): 139
* Total potential recipients: 1,692
* Unresponsive units: 671
* Response rate calculation: **responding units** (all responses to the survey invitation) / **potential recipients** (total invitations sent – rejected or undeliverable emails):
  + Overall response rate: 1,021 responding units from 1,692 potential recipients = 60% response rate
  + Employee survey response rate: 1,469 invitations sent, 1,373 available to respond to the survey
    - 838 responding units from 1,373 potential recipients = 61% response rate
  + Supervisor survey response rate: 362 invitations sent, 319 available to respond to the survey
    - 183 responding units from 319 potential recipients = 57% response rate
* Responding units – breakdown: 1,021
  + Total completed employee surveys: 838
    - Valid cases: 802
    - Invalid or unqualified cases (did not make a request): 36
  + Total completed supervisor surveys: 183
    - Valid cases: 178
    - Invalid or unqualified cases (do not supervise employees or have not made accommodation requests for employees in the past 3 years): 5

**Appendix B: Employee research instrument**

Environics Research

September 17, 2019

**Treasury Board of Canada Secretariat**

**Follow-Up Survey on Workplace Accommodations (Fall 2019)**

**Online Survey for Government of Canada Employees**

**Introduction**

You are receiving this message because you completed the Office of Public Service Accessibility (OPSA) survey on workplace accommodations in May 2019 and expressed interest in participating in future consultations.

You are now invited to participate in a follow-up survey for federal public servants who have requested a workplace accommodation in the past 3 years. The purpose of this survey is to learn more about:

* your journey in requesting a workplace accommodation
* the challenges you encountered
* possible solutions

Your feedback will help OPSA identify ways to improve the accommodation process for all employees.

Your responses to the May 2019 survey were anonymous and are not linked to the current survey. Therefore, some questions are repeated here to help us understand the context of your accommodation journey. Your responses to this current survey are also anonymous. Please do not include any names or information that could be used to identify a specific individual.

It should take no more than 30 minutes to complete the survey, depending on how much information you would like to share. If you cannot complete the survey in one session, you can save the information you have entered using the **Save and continue later** button located at the bottom left of every page and resume your session at another time.

If you would like to complete this survey using an alternative format, or would like to review the questions before completing the survey online, please click on the link provided in the invitation (email) that you received in order to obtain an accessible version of the survey. If you have any questions, please contact our generic mailbox at [Accessibility.accessibilite@tbs-sct.gc.ca](mailto:Accessibility.accessibilite@tbs-sct.gc.ca).

**Privacy notice**

The information in this survey is collected by the Treasury Board of Canada Secretariat (TBS) under the authority of the *Financial Administration Act* to gather feedback that will inform projects and initiatives under the new Centralized Enabling Workplace Fund to improve workplace accommodation practices for federal public servants. The survey uses the third-party online service SimpleSurvey. For additional information on how SimpleSurvey stores and protects information, please visit its frequently asked questions and *Privacy Policy*.

Completion of this questionnaire is voluntary. In your responses, please do not include any information that might disclose your identity or the identity of somebody else. Any personal information collected in this survey, if you have provided any, will be used and protected in accordance with the *Privacy Act* and as described in Personal Information Bank PSU 938 (Outreach Activities) and PSU 914 (Public Communications).

Information gathered through this survey will be summarized in order to protect the identity of individual respondents. A summary of the feedback may be posted on [OPSA's GCPedia page](https://www.gcpedia.gc.ca/wiki/OPSA/BAFP) and on [Library and Archives Canada’s website for public opinion research](https://www.bac-lac.gc.ca/eng/porr/Pages/porr.aspx). Since survey responses are collected anonymously and not attributed to any one individual, TBS will not be able to provide rights to access or correct information you have submitted.

If you have any privacy concerns or questions about this notice, please contact the TBS Access to Information and Privacy Coordinator by email at [atip.aiprp@tbs-sct.gc.ca](mailto:atip.aiprp@tbs-sct.gc.ca). If you are not satisfied with TBS’s response to your privacy concerns, you may wish to contact the Office of the Privacy Commissioner of Canada.

Welcome to the Office of Public Service Accessibility’s follow-up survey on Government of Canada workplace accommodation practices.

All questions require a response in order to continue to the next question. However, you may select “I prefer not to respond” or enter “Nil” or “No comment” in the text boxes if you prefer not to provide an answer to a particular question. Based on your answers to certain questions, the questionnaire will automatically skip any questions or sub-questions that do not apply to your situation.

**If at any point you find the survey unresponsive, please refresh the page.**

To navigate the questionnaire, use the **Previous Page** and **Next Page** buttons located at the bottom left of each page. Do not use the navigation buttons at the top of your browser or the corresponding shortcut keys.

## A. Classification

1. How many separate requests for workplace accommodation have you made for yourself in the past 3 years, for any reason?

00 – None – *skip to Section E (“Demographics”)*

01 – 1

02 – 2

03 – 3

04 – 4 or 5

05 – More than 5

99 – I prefer not to answer

1. Have you experienced **barriers** to your ability to perform tasks and activities in the workplace as a result of a chronic health condition, pain, environmental sensitivity, or any other disability or condition related to mental health, mobility, cognitive abilities (executive function, learning, communication or memory), flexibility or dexterity, seeing, hearing, or other sensory / environmental or intellectual disability

* Yes
* No, I have not experienced these barriers *– skip to Section B (“Accommodation Process”)*
* I prefer not to answer *– skip to Section B (“Accommodation Process”)*

1. Which of the following categories most closely describes the nature of your **primary** condition or disability, meaning the one that causes you the most difficulty in carrying out tasks and activities in the workplace?

Please select one response.

01 - A **chronic health condition or pain** (affects ability to function on a regular or episodic basis due to migraines, Crohn’s disease, colitis, and other disabilities or health conditions)

02 - A **mental health issue** (affects psychology or behaviour, such as anxiety, depression or social / compulsive disorder or phobia or psychiatric illness)

03 - A **mobility issue** (affects ability to move your body, including the required use of a wheelchair or a cane, or other issues impacting your mobility)

04 - A **cognitive** disability (affects ability to carry out tasks involving executive functioning, such as planning and organization, learning information, communication and memory, including autism or Asperger’s syndrome, attention deficit disorder, learning disabilities and speech impediments)

05 - Issues with **flexibility or dexterity** (affects ability to move joints or perform motor tasks, especially with your hands)

06 - A **seeing** disability (affects vision, including total blindness, partial sight and visual distortion)

07 - A **hearing** disability (affects ability to hear, including being hard of hearing, deafness or acoustic distortion)

08 - A **sensory / environmental** disability (affects sensitivity to light, sounds or other distractions, as well as allergens and other environmental sensitivities)

09 - An **intellectual** disability (affects your ability to learn and to adapt behaviour to different situations)

99 - **I prefer not to answer** *– skip to Section B (“Accommodation Process”)*

1. Is your primary chronic health condition, pain, environmental sensitivity or other disability temporary, episodic or permanent?

01 – Temporary

02 – Episodic (recurring)

03 – Permanent

99 – I prefer not to answer

1. Would you describe your primary chronic health condition, pain, environmental sensitivity or other disability as being…?

Please select one response.

01 – **Visible**, where someone interacting with you in the workplace would, in most cases, be aware of it, or

02 – **Invisible**, where someone interacting with you in the workplace would, in most cases, be unaware of it

99 – I prefer not to answer

1. Briefly, please describe how your primary chronic health condition, pain, environmental sensitivity or other disability impacts you in the workplace. Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

## B. Accommodation Process

The next questions are about the accommodation request you made in the past 3 years. If you made more than 1 accommodation request in the past 3 years, please tell us about the request that was **most important or impactful for you**.

1. Which of the following best describes the main reason for the accommodation request?

01 – To address barriers in the workplace related to your **primary** chronic health condition, pain, environmental sensitivity or other disability *– skip to Q10*

02 – To address barriers in the workplace related to **another condition or disability** butnot yourprimaryone

03 – For another purpose, such as for family or religious reasons *– skip to Q10*

99 – I prefer not to answer *– skip to Q10*

1. Which of the following categories most closely describes the nature of your **other** condition or disability that led to your accommodation request?

Please select one response.

01 - A **chronic health condition or pain** (affects ability to function on a regular or episodic basis due to migraines, Crohn’s disease, colitis, and other disabilities or health conditions)

02 - A **mental health issue** (affects psychology or behaviour such as anxiety, depression or social / compulsive disorder or phobia or psychiatric illness)

03 - A **mobility issue** (affects ability to move your body, including the required use of a wheelchair or a cane, or other issues impacting your mobility)

04 - A **cognitive** disability (affects ability to carry out tasks involving executive functioning, such as planning and organization, learning information, communication and memory, including autism or Asperger’s syndrome, attention deficit disorder, learning disabilities and speech impediments)

05 - Issues with **flexibility or dexterity** (affects ability to move joints or perform motor tasks, especially with your hands)

06 - A **seeing** disability (affects vision, including total blindness, partial sight and visual distortion)

07 - A **hearing** disability (affects ability to hear, including being hard of hearing, deafness or acoustic distortion)

08 - A **sensory / environmental** disability (affects sensitivity to light, sounds or other distractions, as well as allergens and other environmental sensitivities)

09 - An **intellectual** disability (affects your ability to learn and to adapt behaviour to different situations)

99 - **I prefer not to answer** *– skip to Q10*

1. Is, or was, the condition or disability that led to your accommodation request temporary, episodic (recurring) or permanent?

01 – Temporary

02 – Episodic (recurring)

03 – Permanent

99 – I prefer not to answer

1. Briefly, please describe the nature of the accommodation you were seeking. Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. Did your accommodation request include any adaptive devices, equipment, software or accessories?

01 – Yes

02 – No *– skip to “For All” (immediately after Q12)*

99 – I prefer not to answer *– skip to “For All” (immediately after Q12)*

1. Please select which adaptive devices, equipment, software or accessories (IT-related or non-IT-related) were part of your accommodation request.

Please select all that apply.

*Codes 01-15 randomized*

01 – Specialized desk or adaptation to existing desk or cubicle

02 – Specialized chair or adaptation to existing chair

03 – Noise-cancelling headphones

04 – Changes to physical workspace to reduce auditory distractions

05 – Changes to physical workspace to reduce visual distractions

06 – Adapted keyboard

07 – Adapted mouse

08 – Large / specialized computer screen

09 – Speech recognition software

10 – Screen- or document-reading software

11 – Non-standard laptop

12 – Wrist or foot rest

13 – Phone headset

14 – Adjusted lighting

15 – Air purification / filter

77 – Other (please specify: \_\_\_) *[anchored at bottom]*

99 – I prefer not to answer *[anchored at bottom]*

*For All*

To examine your journey through the accommodation process, we’ve divided the process into 3 phases:

1. Pre-request
2. Assessment
3. Decision / outcome

**Pre-request Phase**

The **pre-request phase** covers the time when you were deciding whether to request an accommodation, up to and including the point at which you presented your request to your supervisor.

1. What ultimately led to your decision to request a workplace accommodation (as opposed to continuing with the status quo)? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What were the 1 or 2 main challenges or concerns you had, if any, when deciding whether to request an accommodation? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What 1 or 2 things, if any, would have made it easier for you to decide to request an accommodation? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What were the 1 or 2 main thoughts or feelings you had during the time before you presented your request for accommodation? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. How easy or difficult was it to find out how to initiate the accommodation process?

Please select one response.

01 – Very easy

02 – Somewhat easy

03 – Somewhat difficult

04 – Very difficult

99 – I prefer not to answer

**Assessment Phase**

The **assessment phase** covers the time from when you presented your request through all the paperwork, testing or assessments required. The decision or outcome will be covered by questions in the next section.

1. Were you required to provide a medical certificate or other evidence to support the accommodation request? (This does not refer to formal assessments by a medical doctor or specialist, which will be covered in a subsequent question.)

01 – Yes

02 – No *– skip to Q20*

99 – Prefer not to say *– skip to Q20*

1. What 1 or 2 things, if any, could be improved about the medical certificate request process? Please type “Nil” if you have no comments or prefer not to answer, or if you addressed this question in a previous section.

77 – OPEN-END *[Character limit]*

1. Were you required to participate in any of the following types of formal assessments by a medical doctor or specialist?

Please select all that apply.

01 – “Fitness to work” assessment (an evaluation of whether you were medically fit to safely and efficiently perform your job-related duties and/or a comparison between your functional abilities and your job-related duties)

02 – Ergonomic assessment (an evaluation of your workspace and equipment to identify potentially hazardous working conditions and recommend strategies to avoid potential injuries such as those caused by repetitive movements, awkward postures, or prolonged sitting or monitor viewing)

03 – Another type of formal assessment (please specify if you wish (optional): \_\_)

98 – No, none of the above *– skip to Q22*

99 – Prefer not to say *– skip to Q22*

1. What 1 or 2 things, if any, could be improved about the formal assessment process? Please type “Nil” if you have no comments or prefer not to answer, or if you addressed this question in a previous section.

77 – OPEN-END *[Character limit]*

1. Aside from requests for medical certificates or formal assessments by a medical doctor or specialist, is there anything else that could have been done to improve the assessment phase? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What were the 1 or 2 main thoughts or feelings you had during the assessment phase prior to the decision about your accommodation request? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

**Decision/Outcome Phase**

The **decision or outcome phase** is when the request is approved or denied, including when approved accommodations are put in place.

1. As of right now, is your accommodation request:

01 – Approved

02 – Denied *– skip to Q30*

03 – Pending *– skip to Q29*

99 – I prefer not to answer *– skip to Q29*

1. Is your approved accommodation currently…?

01 – Fully in place

02 – Partially in place *– skip to Q28*

03 – Not in place *– skip to Q29*

99 – I prefer not to answer *– skip to Q29*

1. If your accommodation request included adaptive devices, equipment, software or accessories, are these now working properly?

01 – Yes

02 – Partially

03 – No

04 – Not applicable / did not request any adaptive devices, etc.

1. How satisfied are you with the length of time it took for your accommodation to be put in place?

Please select one response.

01 – Very satisfied*– skip to Q33*

02 – Somewhat satisfied *– skip to Q33*

03 – Neither satisfied nor dissatisfied *– skip to Q33*

04 – Somewhat dissatisfied *– skip to Q33*

05 – Very dissatisfied *– skip to Q33*

99 – I prefer not to answer*– skip to Q33*

1. If your accommodation request included adaptive devices, equipment, software or accessories, are these now in place and working properly?

01 – Yes

02 – Partially

03 – No

04 – Not applicable / did not request any adaptive devices, etc.

1. How satisfied are you with the length of time it is taking for your accommodation to be put in place?

Please select one response.

01 – Very satisfied *– skip to Q33*

02 – Somewhat satisfied *– skip to Q33*

03 – Neither satisfied nor dissatisfied– *skip to Q33*

04 – Somewhat dissatisfied *– skip to Q33*

05 – Very dissatisfied *– skip to Q33*

99 – I prefer not to answer *– skip to Q33*

1. Do you feel you were given enough information that explained why your accommodation request was denied?

01 – Yes

02 – No

1. In your opinion, do you feel that any of the following were factors in the rejection of your request?

Please select all that apply.

*Codes 01-09 randomized*

01 – Management was unwilling to vary policies

02 – Management was concerned about perception of favouritism

03 – Management had negative perceptions about my specific condition or disability

04 – A difficult relationship between me and my supervisor

05 – My functional abilities were not accurately interpreted during the accommodation process

06 – A general lack of knowledge about my specific condition or disability

07 – Management was concerned it would establish a precedent

08 – Requested accommodation was too costly

09 – Requested accommodation was too complex

98 – None of the above *[anchored at bottom]*

99 – Prefer not to answer *[anchored at bottom]*

1. Since your accommodation request was denied, what, if anything, do you plan to do next? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What 1 or 2 challenges or concerns, if any, did you have (or are currently having) with the decision phase? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What 1 or 2 things, if any, could have been done to improve the decision phase? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What were the 1 or 2 main thoughts or feelings you had (or are currently having) throughout the decision phase? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. Have you ever taken extended sick leave due to a chronic condition or disability that was aggravated as a result of not being appropriately accommodated?

01 – Yes

02 – No *– skip to Q40*

99 – I prefer not to answer *– skip to Q40*

1. What, if anything, do you feel could have been done differently to avoid the need to take extended sick leave? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. How long were you on extended sick leave as a direct or indirect result of your chronic condition or disability not being appropriately accommodated?

01 – Less than 1 month

02 – 1 to 2 months

03 – 3 to 6 months

04 – 7 to 12 months

05 – 13 to 18 months

06 – 19 to 24 months

07 – More than 24 months

99 – I prefer not to answer

1. How satisfied are you with the level of support and/or accommodation you received when you returned to work after the extended sick leave?

01 – Very satisfied

02 – Somewhat satisfied

03 – Neither satisfied nor dissatisfied

04 – Somewhat dissatisfied

05 – Very dissatisfied

06 – I am still on extended sick leave

99 – I prefer not to answer

1. Looking back over the entire workplace accommodation request process, and setting aside the end result for a moment, how satisfied are you overall with the process you went through?

01 – Very satisfied

02 – Somewhat satisfied

03 – Neither satisfied nor dissatisfied

04 – Somewhat dissatisfied

05 – Very dissatisfied

99 – I prefer not to answer

## C. Career Implications

1. Turning now to a slightly different topic, overall, how do you feel about your career prospects with the Government of Canada over the next 5 years?

01 – Very positive

02 – Somewhat positive

03 – Neutral

04 – Somewhat negative

05 – Very negative

99 – I prefer not to answer *– skip to Q43*

1. Briefly, please elaborate on why you feel this way about your career prospects. Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. Have you ever opted out of a staffing process because of workplace barriers or other considerations related to your chronic condition or disability?

01 – Yes

02 – No

98 – Not applicable (for example, I have not considered applying to a staffing process, or I do not have a chronic condition or disability)

99 – I prefer not to answer

1. Do you feel that you have ever been denied a promotional opportunity for a position you were qualified for because of reasons related to your chronic condition or disability?

01 – Yes

02 – No

98 – Not applicable (for example, I have not pursued a promotional opportunity, or I do not have a chronic condition or disability)

99 – I prefer not to answer

1. Do you feel that you are underemployed or are not being challenged enough in your current position, or could contribute more than your position requires?

01 – Yes

02 – No

99 – I prefer not to answer

1. Have you ever chosen **not** to request an accommodation that would have improved your ability to carry out your job-related duties?

01 – Yes

02 – No *– skip to Q48*

98 – Not applicable / I have not required another accommodation *– skip to Q48*

99 – I prefer not to answer *– skip to Q48*

1. When you chose **not** to request an accommodation that would have improved your ability to carry out your job-related duties, what were your reasons for this?

Please select all that apply.

01 – Believed I could manage the situation on my own

02 – Didn’t want to disclose information about workplace barriers or my chronic condition or disability

03 – Believed my request would not be approved

04 – Concerned about management’s perception of me

05 – Concerned about my relationship with my supervisor

06 – Concerned about my co-workers’ perception of me

07 – Concerned about my relationships with my co-workers

08 – Concerned it might affect my job security or future career prospects

09 – Other reason (please specify): *insert text box*

99 – I prefer not to answer

## D. Key Messages

1. What 1 or 2 key things would you most like your **managers** to know about people in your situation that would help them better support and enable you as an employee? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What 1 or 2 key things would you most like your **co-workers** to know about people in your situation that would help them better support you as a valued team member? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. The Government of Canada is exploring the possibility of an “accommodation passport” program that would allow employees who have an approved accommodation to transfer it to another federal department or position. Although such a program would not change the initial request approval process, it would eliminate the need to apply for the same accommodation multiple times. How helpful do you feel this would be to people in your situation?

01 – Very helpful

02 – Somewhat helpful

03 – Not very helpful

04 – Not at all helpful

99 – I prefer not to answer

## E. Demographics

The final questions gather demographic information about you and your position. They are an important part of the survey because they help us understand how various groups of employees view the accommodation process. All information you provide will be kept anonymous. At no point will your individual survey responses be divulged.

1. In what year were you born?

\_\_\_\_ *- skip to Q53*

9999 – Prefer not to answer

1. Would you be willing to indicate in which of the following age categories you belong?

01 – 18 to 34

02 – 35 to 49

03 – 50 to 54

04 – 55 to 64

05 – 65 or older

99 – Prefer not to answer

1. What is the highest level of formal education that you have completed?

01 – Grade 8 or less

02 – Some high school

03 – High school diploma or equivalent

04 – Registered apprenticeship or other trades certificate or diploma

05 – College, CEGEP or other non-university certificate or diploma

06 – University certificate or diploma below bachelor’s level

07 – Bachelor’s degree

08 – Post-graduate degree above bachelor’s level

99 - Prefer not to answer

1. What is the language you first learned at home as a child and still understand?

Please select all that apply.

01 – English

02 – French

03 – Other

99 – I prefer not to answer

1. In the past 12 months, have you been the victim of **harassment**?

Definition of harassment: Any improper conduct by an individual that is directed at and offensive to another individual in the workplace, including at any event or any location related to work, and that the individual knew or ought reasonably to have known would cause offence or harm. It comprises objectionable act(s), comment(s) or display(s) that demean, belittle, or cause personal humiliation or embarrassment, and any act of intimidation or threat. It also includes harassment within the meaning of the *Canadian Human Rights Act* (that is, based on race, national or ethnic origin, colour, religion, age, sex, sexual orientation, gender identify or expression, marital status, family status, genetic characteristics (including a requirement to undergo a genetic test, or disclose the results of a genetic test), disability or conviction for an offence for which a pardon has been granted or in respect of which a record suspension has been ordered). **Harassment is normally a series of incidents, but it can be one severe incident that has a lasting impact on the individual.**

01 – Yes

02 – No *– skip to Q57*

99 – I prefer not to answer *– skip to Q57*

1. In your opinion, to what extent was the harassment you experienced in the past 12 months related to your chronic health condition or disability?

01 – Strongly related

02 – Somewhat related

03 – Not related

04 – Not applicable / I do not have a chronic health condition or disability

99 – I prefer not to answer

1. In the past 12 months, have you been the victim of **discrimination**?

Definition of discrimination: Treating someone differently or unfairly because of a personal characteristic or distinction, which, whether intentional or not, has an effect that imposes disadvantages not imposed on others or that withholds or limits access that is given to others. There are 13 prohibited grounds of discrimination under the *Canadian Human Rights Act* (that is, based on race, national or ethnic origin, colour, religion, age, sex, sexual orientation, gender identity or expression, marital status, family status, genetic characteristics (including a requirement to undergo a genetic test, or disclose the results of a genetic test), disability or conviction for an offence for which a pardon has been granted or in respect of which a record suspension has been ordered).

01 – Yes

02 – No *– skip to Q59*

99 – I prefer not to answer *– skip to Q59*

1. In your opinion, to what extent was the discrimination you experienced in the past 12 months related to your chronic health condition or disability?

01 – Strongly related

02 – Somewhat related

03 – Not related

04 – Not applicable / I do not have a chronic health condition or disability

99 – I prefer not to answer

1. In which department or agency were you working when the accommodation request described in this survey was made? (choose one)

*[List of all federal organizations; same list as May 2019 OPSA survey on workplace accommodation]*

1. Were you working in an executive or equivalent position when you requested an accommodation?

01 – Yes

02 – No

99 – I prefer not to answer

1. Are you currently working in an executive or equivalent position?

01 – Yes

02 – No

99 – I prefer not to answer

1. In which province or territory do you work?

Please select one only.

01 - National Capital Region

02 - Ontario (excluding National Capital Region)

03 - Quebec (excluding National Capital Region)

04 - Northwest Territories

05 - Nunavut

06 - Yukon

07 - British Columbia

08 - Alberta

09 - Saskatchewan

10 - Manitoba

11 - New Brunswick

12 - Nova Scotia

13 - Prince Edward Island

14 - Newfoundland and Labrador

15 - Outside Canada

1. How do you identify your gender? (Your gender identity may be different from the information on your birth certificate or other official documents.)

01 – Woman

02 – Man

03 – Other (please specify):

99 – I prefer not to answer

*Survey end*

Thank you for taking the time to complete this survey. Your feedback is important to us and will be used to improve how work-related accommodations are provided to enable all federal employees to contribute to their full potential.

**Appendix C: Supervisor research instrument**

Environics Research

September 17, 2019

**Treasury Board of Canada Secretariat**

**Follow-Up Survey on Workplace Accommodations (Fall 2019)**

**Online Survey for Government of Canada Supervisors**

**Introduction**

You are receiving this message because you completed the Office of Public Service Accessibility (OPSA) survey on workplace accommodations in May 2019 and expressed interest in participating in future consultations.

You are now invited to participate in a follow-up survey for supervisors of federal public servants who have requested a workplace accommodation for an employee in the past 3 years. The purpose of this survey is to learn more about:

* your journey in requesting a workplace accommodation
* the challenges you encountered
* possible solutions

Your feedback will help OPSA identify ways to improve the accommodation process for all employees.

Your responses to the May 2019 survey were anonymous and are not linked to the current survey. Therefore, some questions are repeated here to help us understand the context of your accommodation journey. Your responses to this current survey are also anonymous. Please do not include any names or information that could be used to identify a specific individual.

It should take no more than 30 minutes to complete the survey, depending on how much information you would like to share. If you cannot complete the survey in one session, you can save the information you have entered using the **Save and continue later** button located at the bottom left of every page and resume your session at another time.

If you would like to complete this survey using an alternative format, or would like to review the questions before completing the survey online, please click on the link provided in the invitation (email) that you received in order to obtain an accessible version of the survey. If you have any questions, please contact our generic mailbox at [Accessibility.accessibilite@tbs-sct.gc.ca](mailto:Accessibility.accessibilite@tbs-sct.gc.ca).

**Privacy notice**

The information in this survey is collected by the Treasury Board of Canada Secretariat (TBS) under the authority of the *Financial Administration Act* to gather feedback that will inform projects and initiatives under the new Centralized Enabling Workplace Fund to improve workplace accommodation practices for federal public servants. The survey uses the third-party online service SimpleSurvey. For additional information on how SimpleSurvey stores and protects information, please visit its frequently asked questions and *Privacy Policy*.

Completion of this questionnaire is voluntary. In your responses, please do not include any information that might disclose your identity or the identity of somebody else. Any personal information collected in this survey, if you have provided any, will be used and protected in accordance with the *Privacy Act* and as described in Personal Information Bank PSU 938 (Outreach Activities) and PSU 914 (Public Communications).

Information gathered through this survey will be summarized in order to protect the identity of individual respondents. A summary of the feedback may be posted on [OPSA's GCPedia page](https://www.gcpedia.gc.ca/wiki/OPSA/BAFP) and on [Library and Archives Canada’s website for public opinion research](https://www.bac-lac.gc.ca/eng/porr/Pages/porr.aspx). Since survey responses are collected anonymously and not attributed to any one individual, TBS will not be able to provide rights to access or correct information you have submitted.

If you have any privacy concerns or questions about this notice, please contact the TBS Access to Information and Privacy Coordinator by email at [atip.aiprp@tbs-sct.gc.ca](mailto:atip.aiprp@tbs-sct.gc.ca). If you are not satisfied with TBS’s response to your privacy concerns, you may wish to contact the Office of the Privacy Commissioner of Canada.

Welcome to the Office of Public Service Accessibility’s follow-up survey on Government of Canada workplace accommodation practices.

All questions require a response in order to continue to the next question. However, you may select “I prefer not to respond” or enter “Nil” or “No comment” in the text boxes if you prefer not to provide an answer to a particular question. Based on your answers to certain questions, the questionnaire will automatically skip any questions or sub-questions that do not apply to your situation.

**If at any point you find the survey unresponsive, please refresh the page.**

To navigate the questionnaire, use the **Previous Page** and **Next Page** buttons located at the bottom left of each page. Do not use the navigation buttons at the top of your browser or the corresponding shortcut keys.

**A. Classification**

1. Have you supervised 1 or more employees in the past 3 years?

01 – Yes

02 – No *– skip to Section D (“Demographics”)*

1. As a supervisor, how many workplace accommodation requests were requested for your employees in the past 3 years, for any reason?

00 – None *– skip to Section D (“Demographics”)*

01 – 1

02 – 2

03 – 3

04 – 4 or 5

05 – More than 5

99 – I prefer not to answer

1. Have any of your employees requested a workplace accommodation in the past 3 years for any of the following reasons? Select all that apply

01 – To address barriers in the workplace related to a **permanent, chronic or episodic** (recurring) health condition, pain, environmental sensitivity or other disability

02 – To address barriers in the workplace related to a **temporary** health condition, pain, environmental sensitivity or other disability *– skip to Section B (“Accommodation Process”)*

03 – For another purpose, such as for family or religious reasons *– skip to Section B (“Accommodation Process”)*

1. For requests that you received in the past 3 years for a workplace accommodation to address a **permanent, chronic or episodic (recurring) disability or health condition**, did any of these requests involve a disability or health condition that was **invisible**, meaning that someone interacting with this employee in the workplace would, in most cases, be unaware of their disability or health condition?

01 – Yes

02 – No *– skip to Section B (“Accommodation Process”)*

1. To what extent, if any, did the **invisible** nature of an employee’s disability or health condition change the complexity and/or difficulty of the assessment process? Did it make the process…?

01 – Significantly more complex

02 – Somewhat more complex

03 – Made no difference *– skip to Section B (“Accommodation Process”)*

04 – Somewhat less complex *– skip to Section B (“Accommodation Process”)*

05 – Significantly less complex *– skip to Section B (“Accommodation Process”)*

99 – I prefer not to answer *– skip to Section B (“Accommodation Process”)*

1. You indicated that the invisiblenature of an employee’s disability or health condition increased the complexity and/or difficulty of the process involved in assessing their accommodation request. Which of the following factors contributed to the process being more complex and/or difficult in this situation?

Select all that apply.

*Codes 01-08 randomized*

01 – No departmental resources with functional expertise in disability management

02 – Limited knowledge about the implications of the disability or health condition in the workplace

03 – Additional evidence and/or a formal assessment by an external doctor or specialist was required

04 – Concern about creating a precedent

05 – Concern about perceived favouritism or preferential treatment

06 – Management didn’t agree with information provided by doctor or specialist

07 – Management didn’t agree with the need for an accommodation

08 – Management considered the issue to be performance-related, not disability-related

09 – Other (please specify): *[anchored at bottom]*

99 – I prefer not to answer *[anchored at bottom]*

**B. Accommodation Process**

1. When an employee approaches you about requesting workplace accommodations, how easy or difficult have you found it to have these conversations?

01 – Very easy *– skip to Q9*

02 – Somewhat easy *– skip to Q9*

03 – Somewhat difficult

04 – Very difficult

99 – I prefer not to answer *– skip to Q9*

1. Why do you say that? What is particularly difficult about such conversations? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What problems or challenges, if any, have you encountered during the request process that you feel need to be done differently? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What, if anything, have you found works well during the request process? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. In your view, is the process clear for supervisors who request an accommodation for an employee?

01 – Very clear

02 – Somewhat clear

03 – Not very clear

04 – Not at all clear

99 – I prefer not to answer

1. In your view, is it clear who you should contact for assistance in processing an accommodation request for an employee?

01 – Very clear

02 – Somewhat clear

03 – Not very clear

04 – Not at all clear

99 – I prefer not to answer

1. How could any aspect of the accommodation process be made clearer for supervisors such as yourself? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. Employees who request an accommodation may be required to provide a medical certificate or other evidence to support their request. (This does not refer to formal assessments by a medical doctor or specialist, which will be covered in a subsequent section.)

From what you know or have heard, what suggestions, if any, do you have to change or improve the medical certificate requirement that would lead to better outcomes? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. Have any of your employees requesting an accommodation been required to provide a medical certificate or other evidence to support their request?

01 – Yes

02 – No

98 – Not sure

99 – I prefer not to answer

1. Employees who request accommodation may also be required to participate in a formal assessment by a medical doctor or specialist, such as a “fitness to work” assessment, an ergonomic assessment or another type of formal evaluation.

From what you know or have heard, what suggestions, if any, do you have about how to change or improve the formal assessment process that would lead to better accommodation outcomes? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. Have any of your employees who requested accommodation been required to participate in a formal assessment by a medical doctor or specialist?

01 – Yes

02 – No *– skip to Q19*

98 – Not sure *– skip to Q19*

99 – I prefer not to answer *– skip to Q19*

1. Which of the following types of formal assessment were requested for any of your employees who requested an accommodation? Please select all that apply.

01 – “Fitness to work” assessment (an evaluation of whether the employee is medically fit to safely and efficiently perform job-related duties and/or a comparison between their functional abilities and job-related duties)

02 – Ergonomic assessment (an evaluation of the employee’s workspace and equipment to identify potentially hazardous working conditions and recommend strategies to avoid potential injuries such as those caused by repetitive movements, awkward postures, or prolonged sitting or monitor viewing)

03 – Another type of formal assessment (please specify if you wish (optional):)

99 – Prefer not to say

**Decision / outcome**

1. Have you ever had an employee with an accommodation request that was **approved**?

01 – Yes

02 – No *– skip to Q22*

99 – I prefer not to answer *– skip to Q22*

1. What problems or challenges, if any, have you encountered in the implementation of approved accommodations? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What, if anything, did you feel went well during the implementation of approved accommodations? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. Have you ever had an employee with an accommodation request that was **denied**?

01 – Yes

02 – No *– skip to Q24*

99 – I prefer not to answer *– skip to Q24*

1. In your experience, what are the 1 or 2 most common reasons why an accommodation request is denied? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. To what extent do you agree or disagree that you have what you need as a supervisor to effectively manage employee accommodation requests?

01 – Strongly agree

02 – Somewhat agree

03 – Somewhat disagree

04 – Strongly disagree

99 – I prefer not to answer

1. When dealing with employee accommodation requests, to what extent do you feel supported by your direct supervisor?

01 – Very supported

02 – Somewhat supported

03 – Not very supported

04 – Not at all supported

99 – I prefer not to answer

1. When dealing with employee accommodation requests, to what extent do you feel supported by your senior management?

01 – Very supported

02 – Somewhat supported

03 – Not very supported

04 – Not at all supported

99 – I prefer not to answer

1. Which functional area leads the accommodation request process in your department?

Please select one response.

01 – Department’s senior management

02 – Human resources

03 – Labour relations

04 – Disability management unit

77 – Other (please specify: \_\_\_\_)

98 – I do not know

99 – I prefer not to answer

1. In your department, where does the funding for accommodation requests come from?

Please select all that apply.

01 – The budgets of working-level managers

02 – The budgets of senior-level managers

03 – A central fund within your department

77 – Other (please specify: \_\_\_\_)

98 – I do not know

99 – I prefer not to answer

1. In your department, who generally makes the ultimate decision to approve or not approve an accommodation request?

Please select one response.

01 – You (the employee’s immediate manager)

02 – Senior management

03 – Labour relations advisor

04 – Accommodations staff or human resources unit

05 – Facility or property management

77 – Other (please specify: \_\_\_\_)

98 – I do not know

99 – I prefer not to answer

For the next 5 questions, please share your thoughts on improvements that could be made in each of the following areas that could ultimately lead to better outcomes for everyone.

1. In your opinion, which functional area in your department should lead the accommodation process? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. In your opinion, where should the funding for accommodation requests come from? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. In your opinion, at what level in the organization should accommodation requests be approved or denied? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. Is there any other information, resources or support you would like to have, or change you would like to see, to help you more effectively navigate the accommodation request process? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. On a slightly different note, we’d like your thoughts on how the employee performance evaluation process works for employees with disabilities, for example, in terms of how their performance objectives are established or how their results or competencies are assessed. In your view, what, if anything, needs to be improved or changed? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

**C. Key Messages**

1. What 1 or 2 key things would you like **senior management** to know about the accommodation process that you feel would result in it working better for everyone? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. What 1 or 2 key things would you like **employees** who have (or are seeking) accommodations to know because you feel this knowledge would make the accommodation process work better for everyone? Please type “Nil” if you have no comments or if you prefer not to answer.

77 – OPEN-END *[Character limit]*

1. The Government of Canada is exploring the possibility of an “accommodation passport” program that would allow employees who have an approved accommodation to transfer it to another federal department or position. Although such a program would not change the initial request approval process, it would eliminate the need to apply for the same accommodation multiple times.

How helpful do you feel this would be in improving accommodation outcomes for everyone?

01 – Very helpful

02 – Somewhat helpful

03 – Not very helpful

04 – Not at all helpful

99 – I prefer not to answer

**D. Demographics**

The final questions gather demographic information about you and your position. They are an important part of the survey because they help us understand how various groups of employees view the accommodation process. All information you provide will be kept anonymous. At no point will your individual survey responses be divulged.

1. As an employee yourself,do **you** experience barriers to your ability to perform tasks and activities in the workplace, either on a regular or periodic basis, as a result of a chronic health condition, pain, environmental sensitivity or any other disability or condition?

01 – Yes

02 – No

99 – I prefer not to answer

1. In what year were you born?

\_\_\_\_ *- skip to Q41*

9999 – Prefer not to answer

1. Would you be willing to indicate in which of the following age categories you belong?

01 – 18 to 34

02 – 35 to 49

03 – 50 to 54

04 – 55 to 64

05 – 65 or older

99 – Prefer not to answer

1. What is the language you first learned at home as a child and still understand?

Select all that apply.

01 – English

02 – French

03 – Other

99 – I prefer not to answer

1. In which department or agency are you currently employed?

*[List of all federal organizations; same list as May 2019 OPSA survey on workplace accommodations]*

1. Are you currently working in an executive or equivalent position?

01 – Yes

02 – No

99 – I prefer not to answer

1. In which province or territory do you work?

Please select one only.

01 - National Capital Region

02 - Ontario (excluding National Capital Region)

03 - Quebec (excluding National Capital Region)

04 - Northwest Territories

05 - Nunavut

06 - Yukon

07 - British Columbia

08 - Alberta

09 - Saskatchewan

10 - Manitoba

11 - New Brunswick

12 - Nova Scotia

13 - Prince Edward Island

14 - Newfoundland and Labrador

15 - Outside Canada

1. How do you identify your gender? (Your gender identity may be different from the information on your birth certificate or other official documents.)

01 – Woman

02 – Man

03 – Other (please specify):

99 – I prefer not to answer

*Survey end*

Thank you for taking the time to complete this survey. Your feedback is important to us and will be used to improve how work-related accommodations are provided to enable all federal employees to contribute to their full potential.

1. *Baseline Analysis of the May 2019 Survey on Workplace Accommodations in the Federal Public Service.* URL: <https://www.canada.ca/en/government/publicservice/wellness-inclusion-diversity-public-service/diversity-inclusion-public-service/accessibility-public-service/baseline-analysis-2019-survey-workplace-accommodations-federal-public-service.html> [↑](#footnote-ref-2)
2. *Baseline Analysis of the May 2019 Survey on Workplace Accommodations in the Federal Public Service.* URL: <https://www.canada.ca/en/government/publicservice/wellness-inclusion-diversity-public-service/diversity-inclusion-public-service/accessibility-public-service/baseline-analysis-2019-survey-workplace-accommodations-federal-public-service.html> [↑](#footnote-ref-3)
3. 3The definition of harassment that appeared in this survey, and in the 2019 PSES survey, was: “Any improper conduct by an individual that is directed at and offensive to another individual in the workplace, including at any event or any location related to work, and that the individual knew or ought reasonably to have known would cause offence or harm. It comprises objectionable act(s), comment(s) or display(s) that demean, belittle, or cause personal humiliation or embarrassment, and any act of intimidation or threat. It also includes harassment within the meaning of the *Canadian Human Rights Act* (that is, based on race, national or ethnic origin, colour, religion, age, sex, sexual orientation, gender identity or expression, marital status, family status, genetic characteristics (including a requirement to undergo a genetic test, or disclose the results of a genetic test), disability or conviction for an offence for which a pardon has been granted or in respect of which a record suspension has been ordered). Harassment is normally a series of incidents, but it can be one severe incident that has a lasting impact on the individual.” [↑](#footnote-ref-4)
4. The definition of discrimination that appeared in this survey, and in the 2019 PSES survey was: “Treating someone differently or unfairly because of a personal characteristic or distinction, which, whether intentional or not, has an effect that imposes disadvantages not imposed on others or that withholds or limits access that is given to others. There are 13 prohibited grounds of discrimination under the *Canadian Human Rights Act* (that is, based on race, national or ethnic origin, colour, religion, age, sex, sexual orientation, gender identity or expression, marital status, family status, genetic characteristics (including a requirement to undergo a genetic test, or disclose the results of a genetic test), disability or conviction for an offence for which a pardon has been granted or in respect of which a record suspension has been ordered). [↑](#footnote-ref-5)