

# JAN

Job Accommodation Network

Practical Solutions • Workplace Success

## Accommodation and Compliance Series

### Employees with Diabetes

Job Accommodation Network  
PO Box 6080  
Morgantown, WV 26506-6080  
(800)526-7234 (V)  
(877)781-9403 (TTY)  
[jan@askjan.org](mailto:jan@askjan.org)  
[askjan.org](http://askjan.org)



A service of the U.S. Department of Labor's Office of Disability Employment Policy

## Preface

The Job Accommodation Network (JAN) is a service of the Office of Disability Employment Policy of the U.S. Department of Labor. JAN makes documents available with the understanding that the information be used solely for educational purposes. The information is not intended to be legal or medical advice. If legal or medical advice is needed, appropriate legal or medical services should be contacted.

JAN does not endorse or recommend any products or services mentioned in this publication. Although every effort is made to update resources, JAN encourages contacting product manufacturers/vendors and service providers directly to ensure that they meet the intended purposes. This guarantees that the most up-to-date information is obtained.

The following document is not copyrighted and reproduction is encouraged. Section 105 of the Copyright Law provides that no copyright protection is available for works created by the U.S. Government. Therefore, all works created by JAN fall under this provision. While individuals may use such work with impunity, individuals may not claim copyright in the original government work, only in the original material added. Individuals may access the full text of the law from the U.S. Copyright Office <http://www.loc.gov/copyright>. Please note that specific information cited by JAN may be copyrighted from other sources. Citing secondary sources from a JAN publication may violate another organization's or individual's copyright. Permission must be obtained from these sources on a case-by-case basis. When using JAN materials, JAN asks that the materials not be reproduced for profit, that the tone and substance of the information are not altered, and that proper credit is given to JAN as the source of the information. For further information regarding this or any other document provided by JAN, please contact JAN.

Updated 12/20/11.

# **JAN'S ACCOMMODATION AND COMPLIANCE SERIES**

## **Introduction**

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

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

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

## **Information about Diabetes**

### **What is diabetes?**

Diabetes is a disease in which blood glucose levels are above normal. Most of the food we eat is turned into glucose, or sugar, for our bodies to use for energy. The pancreas, an organ that lies near the stomach, makes a hormone called insulin to help glucose get into the cells of our bodies. When you have diabetes, your body either doesn't make enough insulin or can't use its own insulin as well as it should. This causes sugar to build up in your blood (CDC, 2007).

Diabetes can cause serious health complications including heart disease, blindness, kidney failure, and lower-extremity amputations. Diabetes is the sixth leading cause of death in the United States (CDC, 2007).

### **What types of diabetes are there?**

Type 1 diabetes was previously called insulin-dependent diabetes mellitus (IDDM) or juvenile-onset diabetes. Type 1 diabetes develops when the body's immune system destroys pancreatic beta cells, the only cells in the body that make the hormone insulin that regulates blood glucose. This form of diabetes usually strikes children and young adults, although disease onset can occur at any age. Type 1 diabetes may account for 5% to 10% of all diagnosed cases of diabetes. Risk factors for type 1 diabetes may include autoimmune, genetic, and environmental factors (CDC, 2007).

Type 2 diabetes was previously called non-insulin-dependent diabetes mellitus (NIDDM) or adult-onset diabetes. Type 2 diabetes may account for about 90% to 95% of all diagnosed cases of diabetes. It usually begins as insulin resistance, a disorder in which the cells do not use insulin properly. As the need for insulin rises, the pancreas

gradually loses its ability to produce insulin. Type 2 diabetes is associated with older age, obesity, family history of diabetes, history of gestational diabetes, impaired glucose metabolism, physical inactivity, and race/ethnicity. African Americans, Hispanic/Latino Americans, American Indians, and some Asian Americans and Native Hawaiians or Other Pacific Islanders are at particularly high risk for type 2 diabetes. Type 2 diabetes is increasingly being diagnosed in children and adolescents (CDC, 2007).

Gestational diabetes is a form of glucose intolerance that is diagnosed in some women during pregnancy. Gestational diabetes occurs more frequently among African Americans, Hispanic/Latino Americans, and American Indians. It is also more common among obese women and women with a family history of diabetes. During pregnancy, gestational diabetes requires treatment to normalize maternal blood glucose levels to avoid complications in the infant. After pregnancy, 5% to 10% of women with gestational diabetes are found to have type 2 diabetes. Women who have had gestational diabetes have a 20% to 50% chance of developing diabetes in the next 5-10 years (CDC, 2007).

Other specific types of diabetes result from specific genetic conditions (such as maturity-onset diabetes of youth), surgery, drugs, malnutrition, infections, and other illnesses. Such types of diabetes may account for 1% to 5% of all diagnosed cases of diabetes (CDC, 2007).

### **How is diabetes treated?**

It is important to get good medical care if you are a person with diabetes. The American Diabetes Association provides standards of medical care for people with diabetes (see Resources).

Healthy eating, physical activity, and insulin injections are the basic therapies for type 1 diabetes. The amount of insulin taken must be balanced with food intake and daily activities. Blood glucose levels must be closely monitored through frequent blood glucose testing (CDC, 2007).

Healthy eating, physical activity, and blood glucose testing are the basic therapies for type 2 diabetes. In addition, many people with type 2 diabetes require oral medication, insulin, or both to control their blood glucose levels (CDC, 2007).

People with diabetes must take responsibility for their day-to-day care, and keep blood glucose levels from going too low or too high. People with diabetes should see a health care provider who will monitor their diabetes control and help them learn to manage their diabetes. In addition, people with diabetes may see endocrinologists, who may specialize in diabetes care; ophthalmologists for eye examinations; podiatrists for routine foot care; and dietitians and diabetes educators who teach the skills needed for daily diabetes management (CDC, 2007).

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

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

The ADA does not contain a list of medical conditions that constitute disabilities. Instead, the ADA has a general definition of disability that each person must meet on a case by case basis (EEOC Regulations . . . , 2011). A person has a disability if he/she has a physical or mental impairment that substantially limits one or more major life activities, a record of such an impairment, or is regarded as having an impairment (EEOC Regulations . . . , 2011).

However, according to the Equal Employment Opportunity Commission (EEOC), the individualized assessment of virtually all people with diabetes will result in a determination of disability under the ADA; given its inherent nature, diabetes will almost always be found to substantially limit the major life activity of endocrine function (EEOC Regulations . . . , 2011).

### **Where can employers get additional information about diabetes and the ADA?**

The Equal Employment Opportunity Commission (EEOC) has a publication called "Questions and Answers about Diabetes in the Workplace and the Americans with Disabilities Act (ADA)" available on-line at <http://www.eeoc.gov/facts/diabetes.html>.

## **Accommodating Employees with Diabetes**

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

### **Questions to Consider:**

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

### **Accommodation Ideas:**

Hypo/Hyperglycemia:

- Allow for storage of medications, such as insulin and/or food
- Provide an area to test blood sugar levels
- Provide an area to administer medications (insulin)
- Provide appropriate containers for needles/syringe disposal
- Provide a rest area for reorientation after hypo/hyperglycemic episode
- Allow frequent breaks for food as needed
- Provide appropriate food for office sponsored events and reward programs
- Consider modifications to policies involving food storage and consumption

### Neuropathy (Nerve damage):

- Modify job tasks requiring fine finger dexterity
- Provide protective clothing and equipment
- Eliminate or reduce the need to use sharp objects
- Provide anti-fatigue mats or padded carpeting
- Allow flexibility to sit or stand
- Provide parking accommodations

### Fatigue or Weakness:

- Allow frequent rest breaks
- Reduce or eliminate strenuous activities
- Provide anti-fatigue mats or padded carpeting
- Provide a rest area with cot
- Allow flexibility to sit or stand
- Allow job sharing
- Shorten work day and extend work week

### Vision Impairment:

(Not an inclusive listing of accommodation ideas, see Accommodation Ideas for Individuals with Vision Impairments for further information at <http://AskJAN.org/media/Sight.html>)

- If the individual benefits from magnification, consider external magnification devices or computer screen magnification software
- If the individual does not benefit from magnification, consider Braille, tactile graphics, or assistive technology (e.g., screen reading software)
- If the individual is experiencing blurriness or haziness use of high contrast settings and themes may be helpful
- Provide a digital voice recorder
- Provide a qualified reader
- Allow flexible schedule to use public transportation to and from work
- Allow use of service animal for assistance with vision and/or mobility
- If the individual experiences photosensitivity, consider alternative lighting such as lamps or fluorescent light filters

### Kidney Disease:

- Provide easy access to restroom facilities
- Allow a flexible schedule or time off for treatment (dialysis)
- Some individuals may be able to telework from the dialysis site

### Cognitive Limitations:

- Provide written job instructions and prioritize assignments
- Increase job structure
- Use of day planner or electronic organizer
- Provide flexible work hours
- Provide reminders
- Minimize distractions

### Psychological Limitations:

- Reduce stress
- Allow time off for counseling or therapy

### Other Considerations:

- Provide area to brush teeth to prevent periodontal gum disease
- Evaluate safety hazards
- Avoid temperature extremes to help deal with poor circulation
- Educate coworkers on emergency situation procedures and identification of symptoms of hypoglycemia or hyperglycemia

### **Situations and Solutions:**

A nurse with insulin-dependent diabetes and hypoglycemia was having problems regulating her condition (specifically, eating regularly while at work). Her schedule was altered by eliminating the evening rotation until her blood glucose levels could be controlled on a consistent basis. The employer reported this as a very effective accommodation. Cost of accommodation: none.

A data entry clerk with diabetes was having problems with vision. Her employer installed additional lighting in the file room and purchased a glare filter for her computer monitor to reduce eyestrain. Approximate cost: \$30.

An employee in a manufacturing plant had difficulty working through an 8-hour shift without a break (typically employees work straight through). Accommodation suggestions: flexible schedule where a break can be provided if employee makes up the time by coming in 15 minutes early and staying 15 minutes later.

A cafeteria worker with diabetes had difficulty standing in one place for long periods of time. Accommodation suggestions: use anti-fatigue mats, sit/stand/lean stool, and frequent rest breaks.

An investigator was having problems balancing between reading text and his computer screen due to diabetic retinopathy. Accommodations suggestions: use task lighting;

glare filter for computer monitor; and Closed Circuit Television with split screen to view text and computer monitor at same time.

A production assembly line worker had symptoms of frequent urination and neuropathy in his legs. The employee could not leave his work area except during scheduled breaks. Accommodation suggestions: use anti-fatigue mat, sit/stand/lean stool, and an in-house paging system to notify the supervisor that a replacement is needed while the employee takes a restroom break.

### **Products:**

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

### **Terminology:**

**Blood Glucose:** Blood glucose is the main sugar that the body makes from the food we eat. Glucose is carried through the bloodstream to provide energy to cells. The cells cannot use glucose without insulin.

**Insulin:** Insulin is a hormone that helps the body use blood glucose for energy. When people with diabetes cannot make enough insulin, they may need to inject it as a prescribed medication.

**Hypoglycemia:** Hypoglycemia is a condition that occurs when blood glucose levels are too low. The person can become cranky, tired, sweaty, hungry, confused, and shaky and in some instances can lose consciousness or experience a seizure. Eating sugar may treat this, for example soda, lifesavers, or glucose tablets.

**Hyperglycemia:** Hyperglycemia occurs when blood sugar is too high. Insufficient insulin, overeating, inactivity, illness, stress, or a combination of these factors may cause this. Symptoms include extreme thirst, frequent urination, fatigue, blurred vision, vomiting, and weight loss.

**Neuropathy:** Neuropathy is a disease of the nervous system that may affect the organs, feet, and/or hands.

**Diabetic Nephropathy:** Diabetic Nephropathy, or kidney disease, occurs when there is damage to the kidney.

## Resources

### **Job Accommodation Network**

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

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

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

200 Constitution Avenue, NW, Room S-1303  
Washington, DC 20210  
Toll Free: (866)633-7365  
TTY: (877)889-5627  
Fax: (202)693-7888  
<http://www.dol.gov/odep/>

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

### **American Association of Diabetes Educators**

200 W. Madison Street  
Suite 800  
Chicago, IL 60606  
Toll Free: (800)338-3633  
aade@aadenet.org  
<http://www.diabeteseducator.org>

The AADE is a multi-disciplinary professional membership organization dedicated to advancing the practice of diabetes self-management training and care as integral components of health care for persons with diabetes and lifestyle management for the prevention of diabetes.

### **American Diabetes Association**

1701 North Beauregard Street  
Alexandria, VA 22311  
Toll Free: (800)342-2383

AskADA@diabetes.org  
<http://www.diabetes.org/>

The American Diabetes Association is the nation's leading nonprofit health organization providing diabetes research, information and advocacy.

**American Dietetic Association**

National Center for Nutrition and Dietetics  
120 South Riverside Plaza  
Suite 2000  
Chicago, IL 60606-6995  
Toll Free: (800)877-1600  
<http://www.eatright.org>

ADA members are the most valued source of food and nutrition services.

**American Heart Association**

7272 Greenville Avenue  
Dallas, TX 75231  
Toll Free: (800)242-8721  
<http://www.americanheart.org>

The American Heart Association is dedicated to providing education and information on fighting heart disease and stroke.

**Diabetes Exercise & Sports Association**

310 West Liberty, Ste. 604  
Louisville, KY 40202  
Toll Free: (800)898-4322  
Fax: (502)581-0206  
[desa@diabetes-exercise.org](mailto:desa@diabetes-exercise.org)  
<http://www.diabetes-exercise.org>

Diabetes Exercise & Sports Association (DESA) exists to enhance the quality of life for people with diabetes through exercise and physical fitness.

**Indian Health Service**

Division of Diabetes Treatment and Prevention  
National Diabetes Program  
5300 Homestead Road, NE  
Albuquerque, NM 87110  
Direct: (505)248-4182  
Fax: (505)248-4188  
[diabetesprogram@ihs.gov](mailto:diabetesprogram@ihs.gov)  
<http://www.ihs.gov/MedicalPrograms/Diabetes/>

The mission of the Indian Health Service (I H S) National Diabetes Program is to develop, document, and sustain a public health effort to prevent and control diabetes in American Indian and Alaska Native peoples.

**Juvenile Diabetes Research Foundation International**

26 Broadway  
New York, NY 10004  
Toll Free: (800)533-CURE  
Direct: (212)785-9500  
Fax: (212)785-9595  
info@jdrf.org  
<http://www.jdrf.org>

Mission is to find a cure for diabetes and its complications through the support of research.

**National Diabetes Information Clearinghouse (NDIC)**

Building 31. Rm 9A06  
31 Center Drive, MSC 2560  
Bethesda, MD 20892-2560  
Direct: (301)496-3583  
<http://www.niddk.nih.gov>

An information and referral service of the National Institute of Diabetes and Digestive and Kidney Diseases. The clearinghouse responds to written inquiries develops and distributes publications about diabetes and maintains a database of patient and professional education materials.

**National Eye Institute**

National Eye Institute Information Office  
31 Center Drive MSC 2510  
Bethesda, MD 20892-2510  
Direct: (301)496-5248  
2020@nei.nih.gov  
<http://www.nei.nih.gov>

The National Eye Institute (NEI) was established by Congress in 1968 to protect and prolong the vision of the American people.

**National Institute of Diabetes & Digestive & Kidney Diseases**

Office of Communications & Public Liaison  
Building 31, Room 9A06  
31 Center Drive, MSC 2560  
Bethesda, MD 20892-2560  
Direct: (301)496-3583  
<http://www.niddk.nih.gov>

The National Institute of Diabetes and Digestive and Kidney Diseases conducts and supports research on many of the most serious diseases affecting public health. The Institute supports much of the clinical research on the diseases of internal medicine and related subspecialty fields as well as many basic science disciplines.

**National Kidney Foundation**

30 East 33rd St., Suite 1100

New York, NY 10016

Toll Free: (800)622-9010

Direct: (212)889-2210

Fax: (212)689-9261

<http://www.kidney.org>

The National Kidney Foundation, Inc., a major voluntary health organization, seeks to prevent kidney and urinary tract diseases, improve the health and well-being of individuals and families affected by these diseases, and increase the availability of all organs for transplantation.

## References

Centers for Disease Control and Prevention. (2007). *Basics about diabetes*. Retrieved

September 5, 2008, from <http://www.cdc.gov/diabetes/faq/basics.htm>

EEOC Regulations To Implement the Equal Employment Provisions of the Americans

With Disabilities Act, as Amended, 29 C.F.R. § 1630 (2011).

This document was developed by the Job Accommodation Network, funded by a contract agreement from the U.S. Department of Labor, Office of Disability Employment Policy (DOL079RP20426). The opinions expressed herein do not necessarily reflect the position or policy of the U.S. Department of Labor. Nor does mention of trade names, commercial products, or organizations imply endorsement by the U.S. Department of Labor.