

JAN

Job Accommodation Network

Practical Solutions • Workplace Success

Accommodation and Compliance Series

Employees with Sleep Disorders

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

Preface

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JAN'S ACCOMMODATION AND COMPLIANCE SERIES

Introduction

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

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

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

Information about Sleep Disorders

How prevalent are sleep disorders?

According to the National Institute of Neurological Disorders and Strokes, it is estimated that 40 million Americans are diagnosed with a chronic long-term sleep disorder each year, and 20 million Americans have occasional sleep problems (About Sleep Disorders, 2008).

What are sleep disorders?

Sleep disorders are neurological conditions that can affect sleep in a variety of ways. The International Classification of Sleep Disorders (ICSD) lists over 84 different types of sleep disorders that affect the body's normal cycle of daytime wakefulness and night time sleep (About Sleep Disorders, 2008).

Sleep disorders are often categorized into four types: (1) Primary Sleep Disorders, (2) Sleep Disorders Related to Another Mental Disorder, (3) Sleep Disorders Due to a General Medical Condition, and (4) Substance-Induced Sleep Disorders (American Psychiatric Association, 1994). Examples of Primary Sleep Disorders are:

Primary Insomnia: The common complaint of primary insomnia is difficulty falling or staying asleep that is consistent for at least one month. Symptoms include decreased energy, lower concentration, and fatigue. Although symptoms are similar, primary insomnia should not be confused with insomnia related to a mental health impairment or another health condition. Insomnia, in general, often increases with age and affects women more (National Women's Health Information Center, n.d.).

Narcolepsy: Narcolepsy's primary characteristic is the occurrence of sleep attacks, which can occur at any time and during activity or conversation. Individuals with narcolepsy have abnormal sleep patterns and enter Rapid Eye Movement (REM) before going through their regular sleep sequence. Cataplexy (a weakness or paralysis of the muscles), sleep paralysis, and hallucinations are common symptoms of narcolepsy (Neurology Channel, 2005).

Hypersomnia: Hypersomnia's symptoms include excessive sleepiness for a minimum of one month. Excessive sleepiness is often characterized by extended sleep episodes or by daytime sleep episodes that occur daily. Individuals with hypersomnia often sleep 8 to 12 hours a night and have difficulty waking up (American Psychiatric Association, 1994).

Restless Leg Syndrome (RLS): The primary complaint of individuals with RLS is that sensations in the legs, described as pins and needles, crawling, and tingling, occur during sleep. As a result of these sensations, there is an overwhelming urge to move the legs. People with RLS are often sleepy during the day due to lack of sleep. Between 5-10% of Americans have RLS; iron deficiencies and genetics may play a factor in the occurrence (Haran, 2005).

Sleep Apnea: Over 12 million Americans have sleep apnea; it is more common in men over 40 years of age (National Institute of Health, 2003). There are two different types of sleep apnea: (1) central sleep apnea and (2) obstructive sleep apnea (OSA). Nine out of ten people with sleep apnea have OSA. The main characteristic of sleep apnea is that an individual stops breathing for 10-30 seconds at a time while sleeping. As a result, the individual never completes a full sleep cycle and has significant daytime sleepiness. The most common treatment for sleep apnea is the nighttime use of a continuous positive airway pressure (CPAP) machine, which is a mask that is worn at night to force air into an individual's airway. The CPAP keeps a person's airway open while sleeping so the person can reach a deep sleep (American Psychiatric Association, 1994).

Shift Work Type: Ten percent of all shift workers have been diagnosed with shift-work type sleep disorder. Shift work type is a result of disruptions of sleep and wakefulness patterns due to irregular schedules. Rotating shift work is the most disruptive because sleep is never habitual. Serious health conditions can arise out of this, including peptic ulcer disease and heart disease (Basner, 2005).

What causes sleep disorders?

Many causes can be attributed to sleep disorders depending on the type. In many cases, sleep disorders can be a symptom of an underlying medical condition or a side effect of medications. Often times, a family pattern can be shown in conditions such as hypersomnia and narcolepsy (American Psychiatric Association, 1994).

How are sleep disorders treated?

Depending on the type of sleep disorder, life style changes, medications, and surgery can be options (American Psychiatric Association, 1994).

Sleep Disorders and the Americans with Disabilities Act

Are sleep disorders disabilities under the ADA?

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

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

Accommodating Employees with Sleep Disorders

(Note: People with sleep disorders 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 sleep disorders 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 a sleep disorder 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 the sleep disorder been consulted regarding possible accommodations?
6. Once accommodations are in place, would it be useful to meet with the employee with a sleep disorder to evaluate the effectiveness of the accommodations and to determine whether additional accommodations are needed?
7. Do supervisory personnel and employees need training regarding sleep disorders?

Accommodation Ideas:

Daytime Sleepiness:

- Provide a device such as a Doze Alert or other alarms to keep the employee alert
- Reschedule for longer or shorter, more frequent breaks
- Provide a shift change for when the employee is most alert

Maintaining Concentration:

- Provide space enclosures or a private work area or office
- Increase natural lighting or provide full spectrum lighting
- Reduce clutter in the employee's work environment
- Plan for uninterrupted work time
- Divide large assignments into smaller tasks and steps
- Restructure job to include only essential functions
- Allow the employee to listen to music or white noise with a headset

Memory Deficits:

- Post instructions with frequently used equipment
- Allow the employee to tape record verbal instruction or meetings
- Provide written checklists
- Allow additional training time
- Provide written as well as verbal instructions
- Use notebooks, calendars, or sticky notes to record information for easy retrieval

Attendance Issues:

- Provide a flexible start time and/or end time
- Allow the employee to work from home
- Provide a part time work schedule
- Provide a shift change

Decreased Stamina:

- Provide a flexible schedule
- Allow longer or more frequent work breaks
- Provide additional time to learn new responsibilities
- Provide backup coverage for when the employee needs to take breaks
- Restructure job to include only essential functions

Situations and Solutions:

A financial analyst with sleep apnea often fell asleep while working at her computer. The employer provided her with a small device called a Doze Alert that fits in her ear and sounds whenever her head starts to drop forward as she falls asleep.

A customer service representative with hypersomnia had difficulty waking up for his morning schedule, which resulted in him being late for his shift. The employer accommodated him by moving him to the afternoon shift.

A dispatcher with shift work sleep disorder worked rotating shifts that caused his sleep disorder to be exacerbated. The employer changed the rotating shift schedule for all employees to shifts that were assigned by seniority.

A clerical employee with insomnia had a hard time maintaining concentration on the job and his stamina was often poor because of inadequate sleep. This employee was allowed frequent breaks to help improve his stamina.

An accountant with restless leg syndrome was often 10-15 minutes late for work every day due to amount and quality of sleep. The employer provided this employee with a half an hour flexible start time. Depending on when the employee arrived, the time was made up either in a break or at the end of the day.

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, upon request JAN provides these lists and many more that are not available on the Web site. Contact JAN directly if you have specific accommodation situations, are looking for products, need vendor information, or are seeking a referral.

Resources

Job Accommodation Network

West Virginia University
PO Box 6080
Morgantown, WV 26506-6080
Toll Free: (800)526-7234
TTY: (877)781-9403
Fax: (304)293-5407
jan@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)633-7635
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 Academy of Sleep Medicine

1 Westbrook Corporate Center
Suite 920
Westchester, IL 60154
Direct: (708)492-0930
Fax: (708)492-0943
<http://www.aasmnet.org>

The American Academy of Sleep Medicine (AASM) is a professional medical association representing practitioners of sleep medicine and sleep research.

American Sleep Apnea Association

1424 K Street NW
Suite 302
Washington, DC 20005
Direct: (202)293-3650
Fax: (202)293-3656
<http://www.sleepapnea.org>

The American Sleep Apnea Association is a non-profit organization that promotes education and awareness, the ASAA A.W.A.K.E. Network of voluntary mutual support groups, research, and continuous improvement of care.

Narcolepsy Network

79 Main Street
North Kingstown, RI 02852
Toll Free: (888)292-6522
Direct: (401)667-2523
Fax: (401)633-6567
narnet@narcolepsynetwork.org
<http://www.narcolepsynetwork.org>

Narcolepsy Network is a national, non-profit organization incorporated in 1986. Members are people who have narcolepsy (or related sleep disorders), their families and friends, and professionals involved in treatment, research, and public education regarding narcolepsy.

National Institute of Neurological Disorders and Stroke

P.O. Box 5801
Bethesda, MD 20824
Toll Free: (800)352-9424
Direct: (301)496-5751
TTY: (301)468-5981
<http://www.ninds.nih.gov/>

The NINDS, an agency of the U.S. Federal Government and a component of the National Institutes of Health and the U.S. Public Health Service, is a lead agency for the congressionally designated Decade of the Brain, and the leading supporter of biomedical research on disorders of the brain and nervous system.

National Sleep Foundation

1522 K Street, NW, Suite 500

Washington, DC 20005

Direct: (202)347-3471

Fax: (202)347-3472

nsf@sleepfoundation.org

<http://www.sleepfoundation.org>

The National Sleep Foundation is a nonprofit organization that promotes public understanding of sleep and sleep disorders and supports sleep-related education, research, and advocacy to improve public health and safety.

Restless Leg Syndrome Foundation

1610 14th St NW Suite 300

Rochester, MN 55902

Direct: (507)287-6465

Fax: (507)287-6312

rlsfoundation@rls.org

<http://www.rls.org>

The Restless Leg Syndrome Foundation provides information on RLS-diagnosis, treatment, and support from others with the condition.

Sleep Disorders Guide

<http://www.SleepDisordersGuide.com>

This Web site is designed to be a valuable tool for patients and members of the public who are seeking dependable information related to sleep, sleep disorders, treatments and services. Although the processes of sleep and its workings in the body are quite complex, the goal of this site is to present accurate, scientific information in a concise manner that is easy to understand.

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