



# INITIAL INTERACTIVE PROCESS MEETING NOTES

Per VA Handbook 5975.1, section 8, "The interactive process is the communication between the Decision Making Official (DMO) and the employee, in consultation with the Reasonable Accommodation Coordinator (RAC), to determine how best to respond to the employee's request. During this process, an individualized assessment will be conducted to review essential and marginal job functions, the employee's limitations, and possible accommodations. The interactive process may require more than one discussion. The DMO or RAC will also explain the reasonable accommodation process to the employee during the 1st Interactive Process meeting.

**PLEASE NOTE:** An effective Interactive Process requires ongoing communication and cooperation, especially when a specific limitation, problem, or barrier is unclear or when the disability or an effective accommodation is not obvious. Upon conclusion of this meeting, any information shared between parties is protected and considered confidential. Under the Rehabilitation Act, the request, the disability, and any medical information obtained in the accommodation process or via other channels, must be kept confidential. Confidentiality rules regarding disability status apply to all employees and applicants, whether or not they are individuals with disabilities. Violation of the Rehabilitation Act's medical confidentiality requirements exposes the agency to liability, even if no other action is taken against the individual whose medical information is disclosed.

1. TODAY'S DATE	2. TIME (i.e. 10 a.m. EST)	3. PARTICIPANTS (full name/title) - i.e. John Doe, DMO; Jane Smith, RAC; and Paul Jones, Requestor
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### GENERAL QUESTIONS FOR THE EMPLOYEE

1. WHAT ARE THE FUNCTIONAL LIMITATIONS PREVENTING YOU FROM PERFORMING YOUR ESSENTIAL FUNCTIONS? (Inform the employee UP FRONT to NOT share any medical information as DMO's are not authorized to know the employee's medical condition, severity of the condition, treatment received, etc. As the DMO, you are entitled to know the functional limitations of your employee ONLY.)

2. WHAT ESSENTIAL FUNCTIONS DO YOU FEEL ARE AFFECTED BY YOUR FUNCTIONAL LIMITATIONS?

3. WHAT CAN THE FACILITY/ORGANIZATION DO TO ACCOMMODATE YOU? (Annotate any recommended barriers the employee feels could be removed allowing them to perform the essential functions of their position)

4. HOW WILL THE REQUESTED ACCOMMODATION HELP YOU CONTINUE PERFORMING THE ESSENTIAL FUNCTIONS OF YOUR POSITION?

5. HOW LONG IS IT ANTICIPATED THE ACCOMMODATION WILL BE NEEDED? (DMO's CAN NOT put an end date on an RA approval UNLESS the Physician recommends an end date - i.e. Temporary Accommodation until January 1, 2019)

6. DO YOU HAVE ANY RECOMMENDATIONS ON ALTERNATE ACCOMMODATIONS THAT MAYBE EFFECTIVE AT MEETING YOUR FUNCTIONAL LIMITATIONS? (List out any alternate accommodations recommended by the employee and/or provide any alternate accommodations you are considering, as the DMO, in order to received feedback)

\*\*\* When sending this form via electronic means, please ensure the file is encrypted to protect the requestors PII & PHI information.

This form should be retained separately from the employee's Official (paper or electronic) Personnel File.