

44th Judicial District of Pennsylvania- Wyoming and Sullivan Counties

AMERICAN WITH DISABILITIES ACT (Title II) POLICY

The Unified Judicial System of Pennsylvania (UJS) complies with Title II of the Americans with Disabilities Act (ADA) which provides that “no qualified individual with a disability shall, by reason of such disability, be excluded from participating in or be denied the benefits of the services, programs or activities of a public entity, or be subject to discrimination by any such entity.” 42 U.S.C.A §12132. Pursuant to that requirement, if you are an individual with a disability who needs any accommodation in order to participate in any judicial proceeding or any other service, program, or activity of the UJS, you are entitled, at no cost to you, the provision of certain assistance. The ADA does not require the 44th Judicial District to take any action that would fundamentally alter the nature of its programs or services, or impose an undue financial or administrative burden.

If you require an accommodation under the ADA, it is recommended that you make your request as soon as possible or at least three (3) business days before your scheduled participation in any court proceeding or UJS program or activity. All requests for accommodation, regardless of timeliness, will be given due consideration and if necessary, may require an interactive process between requestor and the 44th Judicial District to determine the best course of action.

To request reasonable accommodations, please complete the *Request for Reasonable Accommodation Form* (Appendix A) and return it to:

Terilyn Wickizer, District Court Administrator
44th Judicial District- Wyoming and Sullivan Counties
Wyoming County Courthouse
One Courthouse Square
Tunkhannock, Pennsylvania 18657
570-836-3151 Fax-570-836-7901
twickizer@wyomingcountypa.gov

If you need assistance completing this form, contact the ADA Coordinator.

Complaints alleging violations of Title II under the ADA may be filed pursuant to the UJS Grievance Procedure with:

Terilyn Wickizer, District Court Administrator
44th Judicial District- Wyoming and Sullivan Counties
Wyoming County Courthouse
One Courthouse Square
Tunkhannock, Pennsylvania 18657
570-836-3151 Fax-570-836-7901
twickizer@wyomingcountypa.gov

A response will be sent to you after careful review of the facts.

44th Judicial District of Pennsylvania- Wyoming and Sullivan Counties

AMERICAN WITH DISABILITIES ACT (Title II) GRIEVANCE PROCEDURE

This grievance procedure is established for the prompt resolution of complaints alleging any violation of Title II of the American with Disabilities Act (ADA) in the provisions of services, programs, or activities by the Unified Judicial System (UJS). If you require a reasonable accommodation to complete this form, or need this form in an alternate format, please contact the Court ADA Coordinator:

Terilyn Wickizer, District Court Administrator
44th Judicial District- Wyoming and Sullivan Counties
Wyoming County Courthouse
One Courthouse Square
Tunkhannock, Pennsylvania 18657
570-836-3151 Fax-570-836-7901
twickizer@wyomingcountypa.gov

To file a complaint under the Grievance Procedure, please take the following steps:

1. Complete the complaint for (Appendix B) and return to:

Terilyn Wickizer, District Court Administrator
44th Judicial District- Wyoming and Sullivan Counties
Wyoming County Courthouse
One Courthouse Square
Tunkhannock, Pennsylvania 18657
570-836-3151 Fax-570-836-7901
twickizer@wyomingcountypa.gov

2. Within fifteen (15) calendar days of receipt of the complaint, the ADA Coordinator will investigate the complaint, including meeting with the individual seeking an accommodation, either in person or via telephone, to discuss the complaint and the possible resolutions. Within fifteen (15) calendar days of the meeting, the ADA Coordinator will respond in writing, and where appropriate, in a format accessible to the complainant, such as large print, Braille or audio. The response will explain the position of the 44th Judicial District and offer options for substantive resolution of the complaint.
3. If the response to the complaint does not satisfactorily resolve the issue, the complainant may appeal the decision with fifteen (15) calendar days after receipt of the response to the President Judge of the 44th Judicial District. Withing fifteen (15) calendar days after receipt of the appeal, the President Judge will meet with the complainant to discuss the complaint and possible resolution. Within fifteen (15) calendar days after the meeting, the President Judge will respond in writing, and where appropriate, in a format accessible to the complainant, with a final resolution of the complaint.

This grievance procedure is informal. An individual's participation in this informal process is completely voluntary. Use of this grievance procedure is not a prerequisite to and does not preclude a complainant from pursuing other remedies available under the law.

The UJS policy on Non-Discrimination and Equal Employment Opportunity also encompasses disability related issues and provides complaint procedures for the UJS court users. Any employment-related disability discrimination complaints will be governed by the UJS Policy on Non-Discrimination and Equal Employment Opportunities.

Addendum ADA Policy for the 44th Judicial District

It is the policy of this judicial district to prohibit discrimination against all individuals—including those with substance use disorder—in accessing or participating in judicial proceedings or other Court services, programs, or activities.

The United States Department of Justice maintains that blanket or *per se* bans barring or otherwise limiting persons under court supervision (including pretrial probation and release, post-conviction probation and parole, and Problem-Solving Courts—including Adult, Juvenile, or Family Drug Court; DUI Court, Adult or Juvenile Mental Health Court; veterans Treatment Court; Domestic Violence Court) from accessing physician-prescribed medications and treatment is a violation of the Americans with Disabilities Act (ADA).

It is the policy of this judicial district to conform to the position of the United States Department of Justice in the following respects.

Absent an individualized determination, as more fully described below, no judge, unit, or member of this judicial district may prohibit or otherwise limit an individual's use of medication that they have been lawfully prescribed, and that they are taking as prescribed, to treat substance use disorder.

Decisions about whether a person should be prescribed medication, and about medication type and dosage, are to be made only by a licensed prescriber on an individualized basis.

No judge, unit, or member of this judicial district will interfere with a licensed prescriber's decisions about an individual's appropriate medication and treatment regimen.

No judge, unit, or member of this judicial district will express a preference for, or mandate, one medication over another nor in any way penalize or restrict an individual participating in a court proceeding or program from taking their medication as prescribed.

No judge, unit, or member of this judicial district will condition admission to, participation in, or successful completion of a Problem-Solving Court or other court program, service, or activity on reducing, weaning off, or abstaining from taking prescribed medication.

No judge, unit, or member of this judicial district will rely upon prior illicit use of medication for substance use disorder as grounds for prohibiting current use of medication for substance use disorder that comes from a licensed prescriber.

Individuals with substance use disorder who are participating in a court proceeding or program may be required to comply with the treatment recommendations of a licensed prescriber.

This Policy is not intended to interfere with appropriate exercises of judicial discretion in individual cases. To that end, nothing in this Policy limits a judge's discretion to order that an individual be evaluated for medical treatment or comply with a treatment plan as a condition of release, probation, supervision, or participation in a Problem-Solving Court or other court or probation program. In issuing such an order, a judge should make an individualized determination, based on the information available, which may include an individual's criminal, medical, and probation history. An individual's previous illicit use of a medication is not grounds for prohibiting their use of that medication going forward as directed by their licensed provider.

Judges have the authority to monitor medication compliance in the context of a term of probation, supervision, or condition of release and to further the court's public safety obligation. When a judge is concerned about an individual's use or misuse of medication, the judge may act to mitigate and reduce the risk of abuse, misuse, and diversion of medication. In many cases, appropriate action will include, among other things, communication with the prescriber by a probation officer or other UJS personnel as directed by the judge.

Compliance with the ADA does not require that a court allow an individual to participate in, or benefit from, its services or programs if the person poses a "direct threat to the health or safety of others." 28 C.F.R. § 35.139. A determination that an individual poses a direct threat must be grounded in current medical knowledge or the best available objective evidence to ascertain: the nature, duration, and severity of the risk; the probability that the potential injury will actually occur; and whether reasonable modifications of policies, practices, or procedures or the provision of auxiliary aids or services will mitigate the risk. *Id.* A court may not conclude that an individual prescribed medication poses a "direct threat" based on generalizations or scientifically unsupported assumptions about medications or persons who are prescribed medication.

Individuals who believe there has been a violation of this Policy may file a grievance pursuant to the Grievance Procedure of the 44th Judicial District, see Appendix B.



APPENDIX A
FOR USE BY JUDICIAL DISTRICTS ONLY

UNIFIED JUDICIAL SYSTEM OF PENNSYLVANIA

AMERICANS WITH DISABILITIES ACT ACCOMMODATION (ADA) TITLE II REQUEST FOR REASONABLE ACCOMMODATION FORM
(INCLUDES REQUEST FOR INTERPRETER FOR HEARING / SPEECH IMPAIRED)

Client Information - Section A

Name: _____ Phone: _____
 Address: _____ Email: _____
 _____ Mobile: _____

Please check the box that most closely describes your status in this matter:
 Litigant Plaintiff Defendant Parent Child Witness Attorney Victim Juror
 Other (please explain) _____

Requestor Information (if different from above)

Name: _____ Bus. Phone/ Mobile: _____
 Address: _____ Fax: _____
 Relationship to Client: _____ Email: _____
 _____ TTY: _____

Accommodation

Nature of the disability for which an accommodation is requested: _____
 Accommodation requested: _____

Location of Proceeding	Proceeding Information (if known)
<input type="checkbox"/> Magisterial District Court No. _____ District Judge Name: _____ <input type="checkbox"/> Criminal Division <input type="checkbox"/> Civil Division <input type="checkbox"/> Orphans' Court Division <input type="checkbox"/> Family Division <input type="checkbox"/> Adult <input type="checkbox"/> Juvenile Specify Address: _____	Case #: _____ Case Name: _____ Judge: _____ Proceeding Date: _____ Proceeding Time: _____ Proceeding Type: _____

AFTER COMPLETING THE FORM, PLEASE SEND TO: COUNTY ADA COORDINATOR

I hereby certify that an Americans with Disabilities Act accommodation is required in the above-captioned action on the date stated.

Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

Service Provider Information - Section B

A SERVICE REQUEST HAS BEEN MADE FOR THE CLIENT NAMED ABOVE.

Service Provider Company: _____ Fax: _____
 Individual Interpreter Name: _____ Email: _____
 Bus. Phone/ Mobile: _____ Date to Provider: _____

Court Official Verification - Section C

VERIFYING OFFICIAL SHALL MAINTAIN A COPY IN THE COURT'S CASE FILE AND PROVIDE THE ORIGINAL TO THE SERVICE PROVIDER FOR SUBMISSION WITH BILLING.

I hereby verify that the services were performed by the provider in the above-captioned action on the date and time stated.

Start Date & Time: _____ End Date & Time: _____
 Court Official: _____ Signature: _____
 _____ (Please print name)
 Title: _____ Date: _____



APPENDIX B

UNIFIED JUDICIAL SYSTEM OF PENNSYLVANIA

**AMERICANS WITH DISABILITIES ACT (ADA) TITLE II
GRIEVANCE FORM**

Grievant Information

Grievant Name: _____ Home Phone (include area code): _____

Address: _____ Business Phone (include area code): _____

Mobile Phone (include area code): _____

Alternative Contact Person (other than Grievant)

Name: _____ Home Phone (include area code): _____

Address: _____ Business Phone (include area code): _____

Relationship To Client: _____

Court Service, Program or Facility Allegedly in Violation

Date and Location of Alleged Violation (dd/mm/yyyy)

Description of Alleged Violation and Requested Remedy

Has this case been filed with the Department of Justice or other government agency or court?

Yes No

If You Answered "Yes" to the Previous Question, Complete the Following

Agency or Court: _____ Contact Person: _____

Address: _____ Phone (include area code): _____

Date Filed: _____

Other Comments

Signature: _____ Date: _____