

# ADA Title II Plan

## Lackawanna County Courts

The Americans with Disabilities Act (ADA) is a comprehensive Federal civil rights statute enacted in 1990. Comprised of five major parts, or “titles”, the ADA’s stated purpose was to provide a “clear and comprehensive national mandate for the elimination of discrimination against individuals with disabilities”. It is estimated by the U.S. Census Bureau that over 50 million U.S. residents have a disability, and over 50% of senior citizens age 65 or older have a disability. Title II requires that all public entities with 50 or more employees perform a self evaluation, prepare a transition plan, make the transition plan available for three years, publish a notice of non-discrimination, designate an ADA Coordinator, and develop a formal complaint form and grievance procedure.

The [Americans with Disabilities Act of 1990](#) (ADA), enacted on July 26, 1990, is a Federal civil rights statute, under the jurisdiction of the United States Department of Justice (DOJ), which provides civil rights protection to qualified individuals with disabilities in the areas of employment, public accommodations, state and local government services, transportation, and telecommunications. Similar protections are provided by [Section 504 of the Rehabilitation Act of 1973](#). The ADA was signed into law by President George Bush on July 26, 1990, extending civil rights protections to individuals with physical or mental disabilities.

The Americans with Disabilities Act was passed in 1990 as a step toward the elimination of discrimination against individuals with disabilities. ADA Title II requires communities to establish self-evaluations and/or transition plans, as determined by community employee size, for updating public facilities. Title II covers programs, activities, and services of government entities with a specific focus on protecting citizens from discrimination on the basis of disability. The goal of this act is to afford every individual the opportunity to benefit from businesses and services and to afford businesses and services the opportunity to benefit from the patronage of all Americans. Regulations state that structural architectural and communication barriers must be removed in public areas of existing facilities when their removal is readily achievable – in other words, easily accomplished and able to be carried out without unfair difficulty or expense.

### **Undue Burden**

The ADA does not require Lackawanna County Courts to undertake any action that would result in a fundamental alteration in the intent of its program or activity, would create a hazardous condition, or would represent an undue financial and administrative burden. This determination can only be made by the ADA Coordinator and must be accompanied by a statement citing the reasons for reaching the conclusion. The determination that undue burdens would result must be based on an evaluation of all resources available for use in the programs.

# Plan requirements & responsibilities

## Title II Requirements

The ADA requires that public entities modify their policies, practices, and procedures in order to provide an equal opportunity for persons with a disability. Title II specifically requires public entities to identify and evaluate all programs, activities, and services and review all policies, practices, and procedures that govern administration of the programs, activities, and services for all government entities employing more than fifty people. These administrative requirements include:

1. Completion of a self-evaluation of programs and facilities
2. Adoption of a set of grievance procedures
3. Designation of a person who is responsible for overseeing Title II compliance
4. Development of a Transition Plan if the self-evaluation identifies any modifications necessary for compliance.

## Americans With Disabilities Act

The Court of Common Pleas is required to comply with the Americans With Disabilities Act of 1990. For information about accessible facilities and reasonable accommodations available to disabled individuals having business before the Court, contact the Court Administration Office at 570-963-6773. All arrangements must be made seventy-two (72) hours prior to any hearing or business before the Court. See below for information on the following:

Self-evaluation of programs and facilities

Americans with Disabilities Act Policy

Request for Accommodation Form

Americans with Disabilities Act Grievance Procedure

Americans with Disabilities Act Grievance Report Form

## Self-evaluation of Programs and Facilities

The County of Lackawanna was formed in August of 1878. It was the last county to be incorporated by the State Legislature. The courthouse was built in 1884 and has had a number of additions and revisions since that time. In 2007, the Courthouse and the Courthouse Square grounds were completely reconfigured and modernized allowing for complete handicapped access to the building. The Courthouse meets all current ADA requirements.

# Court of Common Pleas, 45<sup>th</sup> Judicial District, Lackawanna County, Pennsylvania

## AMERICANS WITH DISABILITIES ACT POLICY

The Court of Common Pleas of Lackawanna County 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 participation in, or be denied benefits of, the services, programs or activities of a public entity (Common Pleas Courts), or be subjected 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 an accommodation in order to participate in any judicial proceedings or any other service, program or activity of the Court of Common Pleas, you are entitled, at no cost to you, to the provision of certain assistance. The ADA does not require the Court of Common Pleas of Lackawanna County 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 court program or activity. All requests for accommodation, regardless of timeliness, will be given due consideration and, if necessary, may require an interactive process between the requestor and the Court of Common Pleas to determine the best course of action.

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

Ronald C. Mackay, District Court Administrator/ADA Coordinator, Lackawanna County Courthouse, 200 North Washington Avenue, Scranton, Pa. 18503; email to [mackayr@lackawannacounty.org](mailto:mackayr@lackawannacounty.org); or fax to (570) 963-6477.

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 Court of Common Pleas Grievance Procedure (Court ADA Coordinator, Ronald C. Mackay- contact as above). A response will be sent to you after careful review of the facts.



**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: _____	Case #: _____
<input type="checkbox"/> Criminal Division <input type="checkbox"/> Civil Division <input type="checkbox"/> Orphans' Court Division	Case Name: _____
<input type="checkbox"/> Family Division <input type="checkbox"/> Adult <input type="checkbox"/> Juvenile	Judge: _____
Specify Address: _____	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 \_\_\_\_\_ End Date \_\_\_\_\_  
 & Time: \_\_\_\_\_ & Time: \_\_\_\_\_  
 Court Official: \_\_\_\_\_ Signature: \_\_\_\_\_  
 (Please print name)

# **Court of Common Pleas, 45th Judicial District, Lackawanna County, Pennsylvania**

## **AMERICANS WITH DISABILITIES ACT GRIEVANCE PROCEDURE**

This grievance procedure is established for the prompt resolution of complaints alleging any violation of Title II of the Americans with Disabilities Act (ADA) in the provision of services, programs or activities by the Court of Common Pleas of the 45<sup>th</sup> Judicial District, Lackawanna County, Pennsylvania. If you require a reasonable accommodation to complete this form, or need this form in an alternate format, please contact Court ADA Coordinator Ronald C. Mackay, Lackawanna County Courthouse, 200 North Washington Avenue, Scranton, Pa. 18503 (570) 963-6773 or via e-mail to [mackayr@lackawannacounty.org](mailto:mackayr@lackawannacounty.org).

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

1. Complete the Grievance Form (Appendix B) and return it to the Court ADA Coordinator. Alternate means of filing complaints will be made available for persons with disabilities upon request. The complaint should be submitted as soon as possible but no later than sixty (60) calendar days after the alleged violation.
2. Within fifteen (15) calendar days of receipt on the complaint, the Court 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 possible resolutions. Within fifteen (15) calendar days of the meeting, the ADA Coordinator or designee 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 Court of Common Pleas 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 decisions within fifteen (15) calendar days after receipt of the response to the President Judge. Within fifteen (15) calendar days after receipt of the appeal, the President Judge will meet with the complainant in person or by telephone to discuss the complaint and possible resolutions. Within fifteen (15) 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.

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

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



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: \_\_\_\_\_