

September 28, 2016

DEPARTMENT OF CORRECTIONS

RULE NO.: 33-210.201

RULE TITLE: ADA Provisions for Inmates

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the Notice of Proposed Rulemaking published in Vol. 42, No. 135 (July 13, 2016) of the Florida Administrative Register. The changes are in response to comments made by the Joint Administrative Procedures Committee in a letter dated August 1, 2016.

The changes to the proposed rule are as follows:

33-210.201 ADA Provisions for Inmates.

(1) No change.

(2) Definitions.

(a) through (j) No change.

(k) Qualified inmate with a disability – ~~refers to an inmate with a disability physical or mental impairment that substantially limits one or more life activities and who, with or without reasonable accomodations or the provision of auxiliary aids and services, meets the essential eligibility requirements of the department for the department program(s), service(s), or activity/activities at issue. and Title II of the ADA of 1990 and whose access to the department's programs, services or activities can be accomplished by reasonable accommodation.~~

(l) through (m) No change.

(3) Accommodation Request Procedure.

(a) No change.

(b) All department and privately operated facilities shall furnish to any inmate, upon request, a Reasonable Modification or Accommodation Request, Form DC2-530A. Form DC2-530A, Reasonable Modification or Accommodation Request, is hereby incorporated by reference. Copies of this form are available from the Forms Control Administrator, Office of Research, Planning and Support Services, 501 South Calhoun Street, Tallahassee, Florida 32399-2500, <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXXXX>. The effective date of this form is _____.

(c) No change.

(d) Upon receipt of Form DC2-530A, the warden or intake officer shall review the inmate's accommodation request. The warden or intake officer shall, as necessary, utilize Form DC2-530B to request additional information from the appropriate program head in order to verify the inmate's disability or to otherwise assist with the review of the request. Form DC2-530B, Reasonable Accommodation or Accommodation Request Institutional Evaluation/Disposition, is hereby incorporated by reference. Copies of this form are available from the Forms Control Administrator, Office of Research, Planning and Support Services, 501 South Calhoun Street, Tallahassee, Florida 32399-2500, <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXXXX>. The effective date of this Form is_____.

(e) through (i) No change.

(4) through (9) No change.

Rulemaking Authority 944.09 FS. Law Implemented 944.09 FS. History--New 8-19-01, Amended 2-8-06, 11-22-06, 1-23-13, 9-30-13,_____.