### **Checklist: Offering Reasonable Accommodations to Individuals with Disabilities**

Does your staff know what action to take if a patient refuses to comply with the practice's COVID-related policies due to a disability, such as a policy that requires all patients and visitors to wear a face masks when not in the operatory? This checklist may be used as a tool to help plan an appropriate response before that happens. For more information, consult the ADA's resource Tips for Complying with the Americans with Disabilities Act.

	Which policies has the dental practice changed to help prevent transmission of COVID-19? Are those policy changes documented, along with their scientific bases? Examples of possible policy changes:			
	0	(e.g., Allow increased time for every appointment.)		
	0	(e.g., When patients schedule appointments, send them a list of rules, including those related to masks, and inform them that they need to contact the practice in advance of the date of their appointment if they require special accommodation (e.g. need to be accompanied by a guardian, or by another individual due to anxiety or other mental health issue).		
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	Might a	any symptom screening for patients and the public be deemed discriminatory "eligibility criteria"?1		
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		e dental practice demonstrate when a patient with certain COVID-related symptoms presents a threat" to the health or safety of others as defined by the Americans with Disabilities Act? <sup>2</sup>		
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	How ca	an nonclinical staff maintain social distancing and still assist an individual with a disability? sles of possible modifications:		
	0	(e.g., Train staff to provide voice guidance to blind individuals.)		
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		ental practice restricts or redirects foot traffic to promote social distancing, can a blind individual or vidual in a wheelchair manage the new traffic flow? Examples of possible modifications:  (e.g. Permit individuals in wheelchairs to use a different traffic flow, while staff provides direction		

to maintain social distancing.)

<sup>&</sup>lt;sup>1</sup> The AwDA Title III Technical Assistance Manual [https://www.ada.gov/taman3.html] states in part: "A public accommodation may not impose eligibility criteria that either screen out or tend to screen out persons with disabilities from fully and equally enjoying any goods, services, privileges, advantages, or accommodations offered to individuals without disabilities, unless it can show that such requirements are necessary for the provision of the goods, services, privileges, advantages, or accommodations." And "A public accommodation may impose legitimate safety requirements necessary for safe operation. However, the public accommodation must ensure that its safety requirements are based on real risks, not on speculation, stereotypes, or generalizations about individuals with disabilities.

<sup>&</sup>lt;sup>2</sup> The AwDA does not require a public accommodation, such as a dental office, to permit an individual "to participate in or benefit from the goods, services, facilities, privileges, advantages and accommodations of that public accommodation when that individual poses a direct threat to the health or safety of others." The regulations provide: "In determining whether an individual poses a direct threat to the health or safety of others, a public accommodation must make an individualized assessment, based on reasonable judgment that relies on current medical knowledge or on 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." Keep in mind that if a dental practice determines that a patient poses a direct threat for purposes of the AwDA, other laws and ethical obligations may separately impose obligations with respect to that patient.

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	an the dental practice accommodate a deaf individual who reads lips and is unable to effectively unicate with a staff member wearing a face mask? Examples of possible modifications:
0	(e.g., Provide staff member with a transparent face shield.)
0	(e.g., Install an acrylic shield.)
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	rill onsite interpreters <sup>4</sup> (e.g., sign language, non-English language) be protected and still provide ve communication? Examples of possible modifications:
0	(e.g., Use remote interpreters in cases where compliant with legal obligations and can achieve effective communication.
0	(e.g., Screen interpreters for symptoms and implement requirements to help prevent virus transmission.)
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	f a sign language interpreter is not able to effectively interpret while wearing a face mask? bles of possible modifications:
0	(e.g., Provide a transparent face shield.)
0	(e.g., Use a remote interpreter service via videoconferencing. [ADA Member Advantage has named <a href="CyraCom">CyraCom</a> as the ADA's endorsed partner for this service.])
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	rill staff respond to an individual who is angry or under stress due to the pandemic? What if the ual live-streams the interaction? Is staff trained to respond appropriately?
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screen	website accessible to individuals with disabilities? For example, can a blind individual using a reader easily navigate your website? Are videos closed captioned? Does your website have ar sibility statement?
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<sup>&</sup>lt;sup>3</sup> An example of a company offering this service is <u>Aira Tech Corp</u>. Inclusion of this company as an example is in no way intended to be an endorsement or recommendation.

<sup>4</sup> The American Dental Association offers a variety of resources, including <u>Using an Interpreter in Your Dental Office</u>, on the use of interpreters.

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	e videoconferencing platform used for virtual appointments accommodate individuals with ties? Examples of possible modifications:			
0	(e.g., Use a platform that permits three participants [e.g., the dentist, the patient and an interpreter]).			
0	(e.g., Use a platform that can provide real time closed captioning.)			
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Is there	e a scientific basis for any changes the practice is considering making to its policy on service s?			
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Is there a risk that COVID-19 might be spread through restroom use? If so, how can the dental office reduce the risk while still permitting disabled individuals to use the restroom (e.g., an individual with a digestive disorder)?				
0	(e.g., Clean and disinfect restrooms and door handles after each use.)			
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	ill the dental practice accommodate a disabled individual's need to have a caregiver present and eps to help prevent virus transmission? Examples of possible modifications:			
0	(e.g., Provide appropriate PPE to the caregiver.)			
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