



585.359.7092
hplinfo@libraryweb.org

Henrietta Public Library
625 Calkins Road
Rochester, NY 14623

Employee Disability Accommodation Policy

Adopted January 2025

The Americans with Disabilities Act ("ADA") and New York Human Rights Law ("HRL") require that people with disabilities not be denied the right to work when accommodations would not impose an undue hardship on the employer.

In furtherance of its mission and to provide an inclusive work environment, the Henrietta Public Library uses the ADA and the HRL to guide policy and procedure regarding disability accommodations and employment.

To ensure the Library's actions reflect this commitment, employees shall follow the below procedures:

1. Job Notices

All job notices shall include notice as to how an application may request ADA accommodations to apply and/or interview for a job at the Library.

2. Applications

No pre-employment inquires (e.g. on an employee application or in an employment interview) will be made into an applicant's disability, into the nature or severity of an applicant's disability, or into prior workers' compensation claims that an application may have filed.

Consistent with current law, regulations, and guidance, applicants may be asked about their ability to perform job-related functions and/or to describe or demonstrate how, with or without reasonable accommodation, the applicant will be able to perform job-related functions.

3. Procurement of workplace equipment

Within established budgets, all procurement efforts shall include consideration of accessibility and universal design.

4. Requesting accommodations

Reasonable accommodation is available to an employee with a disability when the disability affects the performance of job functions.

Employees may initial a request for disability accommodations by contacting their supervisor or the Director and filling out the form attached to this policy. The library director will attempt to reasonably accommodate qualified individuals with a temporary or long-term disability so that they can perform the essential functions of their job, unless doing so would create undue hardship for the operations of the library.



585.359.7092
hplinfo@libraryweb.org

Henrietta Public Library
625 Calkins Road
Rochester, NY 14623

Accommodations will be confirmed or denied in a letter. A denial of accommodations may be appealed per number 6, below.

The library refers to resources such as ASKJAN.ORG to be proactive about access to particular resources and to develop responses to reasonable accommodation requests.

5. Coordination with other policies

Library employees are able to coordinate use of sick time, family medical leave, disability leave, and other types of leave with disability accommodations, but such types of leave are additive and should not be a substitute for ongoing disability accommodations if such reasonable accommodations are granted.

6. Reporting concerns

Any individual who believes that they have been denied an accommodation in error or discriminated against on the basis of having, or being perceived to have, a disability, or believes they have witnessed such discrimination by the Library, is encouraged to report their concerns to their supervisor, or the library director, or a member of the board of trustees, who shall create a record of such report, ensure it is investigated to the degree warranted, and that any necessary remedial actions are taken.



585.359.7092
hplinfo@libraryweb.org

Henrietta Public Library
625 Calkins Road
Rochester, NY 14623

Reasonable Accommodation Request Form

A. Questions to clarify accommodation requested.

What specific accommodation are you requesting?

- Access to website and online forms
- Print material in an accessible format including providing media in alternative format as needed (large print, Braille, text file, etc.)
- Accessible parking and building access (keyless entry, security issues, restrooms, break rooms, exercise rooms, etc.)
- Use of service animal in the workplace
- Computer and communication technology access (alternative input devices, screen reading software, screen magnification, telephone amplification, smartphone or tablet apps, etc.)
- Workspace modification (furniture, lighting, space, noise abatement, etc.)
- Services or work-related assistance (sign language interpreters, readers, note takers, etc.)
- Emergency evacuation and shelter-in-place needs
- Other: _____
- Not sure what accommodation is needed

Please explain.

B. Questions to document the reason for accommodation request.

What, if any, job function do you expect to have difficulty performing?

What, if any, employment benefit do you expect to have difficulty accessing?



585.359.7092
hplinfo@libraryweb.org

Henrietta Public Library
625 Calkins Road
Rochester, NY 14623

What limitation do you anticipate interfering with your ability to perform your job or access an employment benefit?

Have you had any accommodation in the past for this same limitation? Yes No

If yes, what were they and how effective were they?

If you are requesting a specific accommodation, how will that accommodation assist you?

C. Other.

Please provide any additional information that might be useful in processing your accommodation request:

Signature

Date

Return this form to Adrienne Pettinelli, Library Director.



585.359.7092
hplinfo@libraryweb.org

Henrietta Public Library
625 Calkins Road
Rochester, NY 14623

Appeal of a Reasonable Accommodation Determination

This form is to be used by a Henrietta Public Library employee or applicant who wishes to appeal the determination of a request for reasonable accommodation.

All appeals must be received by the library director within thirty (3(S)) days of the date of notification of the initial determination.

Please submit a copy of your appeal to Adrienne Pettinelli, Library Director at adrienne.pettinelli@libraryweb.org.

INSTRUCTIONS: The employee/application should complete Section I of this form and forward it to the above-named person in an envelope marked "Confidential."

SECTION I - TO BE COMPLETED BY EMPLOYEE / APPLICANT

Name:

Type of Accommodation Requested:

Date of Reasonable Accommodation Determination:

Statement of Appeal (clearly state all grounds for appeal; attach additional sheets as necessary):

I am attaching the following additional documentation (do not resubmit any documentation):

I affirm that I have reviewed this accommodation appeal and that it is true to the best of my knowledge, information and belief.



585.359.7092
hplinfo@libraryweb.org

Henrietta Public Library
625 Calkins Road
Rochester, NY 14623

Date of Signature / Applicant

SECTION II - FOR INTERNAL USE

Date of Appeal Received: Date of Acknowledgement: Disposition of Appeal:

Date of Notification of Appeal: