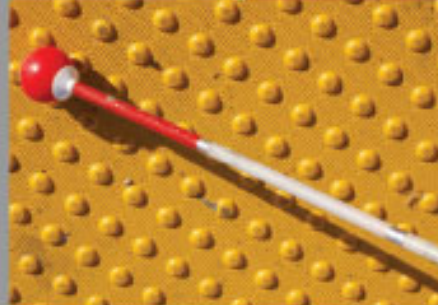


SZS CONSULTING GROUP



CITY OF CITRUS HEIGHTS

DRAFT ADA SELF-EVALUATION UPDATE
DECEMBER 28, 2011

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1. INTRODUCTION

The Access Board, the Americans with Disabilities Act (ADA) of 1990 & the 2010 ADA Standards for Accessible Design

The Access Board was established by section 502 of the Rehabilitation Act of 1973 (Rehab Act)¹. The Board consists of 25 total members, 13 of which are appointed by the President from among the general public and the majority of those members must be individuals with disabilities. The remaining 12 members are the heads of 12 Federal departments and agencies specified by statute, including the heads of the Department of Justice and the Department of Transportation (DOT). Originally, the Access Board was established to develop and maintain accessibility guidelines for facilities designed, constructed, altered, or leased using Federal funds under the Architectural Barriers Act of 1968 (ABA)².

The passage of the ADA in 1990 expanded the Access Board's responsibilities to "*issue minimum guidelines that shall supplement the existing Minimum Guidelines and Requirements for Accessible Design...to ensure that buildings, facilities, rail passenger cars, and vehicles are accessible, in terms of architecture and design, transportation, and communication, to individuals with disabilities*".³ On the other hand, the ADA requires the US Department of Justice (US DOJ) to issue enforceable accessibility standards applicable to facilities subject to ADA title II that are consistent with the "*minimum guidelines*" issued by the Access Board⁴, which means it is required to enforce the standards that the Access Board issues.

The Americans with Disabilities Act (ADA) became effective on July 26, 1990 and it extended legislation intended to eliminate discrimination against individuals with disabilities in federally funded facilities under the Rehab Act to all activities of State and local governments regardless of whether these entities receive Federal financial assistance. It provides for equal access and equal opportunities for individuals with disabilities to participate in programs, services, and activities provided by public entities such as those offered by the city of Citrus Heights.

The ADA is divided into five sections, which are referred to as titles. Title I establishes civil rights in employment for individuals with disabilities. Title II requires access to the programs and services of state and local governments, which includes the city of Citrus Heights. Title III requires access to public accommodations and commercial facilities – virtually all nonresidential, privately owned buildings and Title IV governs accessibility of telecommunications and Title V contains miscellaneous provisions related to enforcement of the law.

The Access Board began revising their 1990 standards in 1994 by establishing an advisory committee composed of members of the design and construction industry, the building code community, and State and local government entities, as well as individuals with disabilities. In

¹ 29 U.S.C. 792

² 42 U.S.C. 4151 *et seq*

³ 42 U.S.C. 12204

⁴ 42 U.S.C. 12134(c); 42 U.S.C. 12186(c)



1998, the Access Board added specific guidelines on State and local government facilities⁵ and building elements designed for use by children. Other updates to the 1990 ADA Standards have been made with the final version being compiled in the 2004 ADA/ABA Guidelines. The 2004 ADA/ABA Guidelines were the culmination of a long-term effort to facilitate ADA compliance by eliminating inconsistencies among Federal accessibility requirements (ADA & ABA Standards) and between Federal accessibility requirements and State and local building codes. In support of this effort, the US DOJ amended its regulation implementing title II and adopted standards consistent with 2004 ADA/ABA Guidelines, naming them the 2010 ADA Standards for Accessible Design.

On March 15, 2011, the final rule on the 2010 ADA Standards for Accessible Design became effective to revise the 1990 regulations that implement title II of the ADA that prohibit discrimination on the basis of disability in State and local government services. The final rule was issued in order to adopt enforceable accessibility standards under the ADA that are more consistent with the minimum guidelines and requirements issued by the Access Board, and to update or amend certain provisions of the title II regulation so that they better reflect the Department's legal and practical experiences in enforcing the ADA since 1991. These new regulations provide a higher degree of clarity to State and local agencies whose put forth the effort to comply with the spirit and intent of the ADA.

TITLE II ENTITY REQUIREMENTS

Title II, Subtitle A covers all programs, services, and activities of state and local government agencies. The City of Citrus Heights is covered by the requirements of Title II. The US DOJ regulation implementing title II, 28 CFR 35.103, provides the following:

- (a) *Rule of interpretation.* Except as otherwise provided, the 2010 ADA Standards shall not be construed to apply a lesser standard than the standards applied under title V of the Rehabilitation Act of 1973 (29 U.S.C. 791) or the regulations issued by Federal agencies pursuant to that title.
- (b) *Other laws.* The 2010 ADA Standards do not invalidate or limit the remedies, rights, and procedures of any other Federal, State, or local laws (including State common law) that provide greater or equal protection for the rights of individuals with disabilities or individuals associated with them.

This rule is critical in California, as more stringent statutes such as the Unruh Act (Civil Code 51) and regulations such as Government Code §12900-12996 defined as the California Fair Employment and Housing Act (FEHA) apply. The ADA defines a disability as a physical or mental impairment that limits one or more major life activities (such as walking, hearing, seeing, caring for oneself, speaking, breathing, learning, and working). Under the FEHA, a disability is defined as a physical or mental impairment that only *limits* (not substantially limits) one or more major life activity, which is a much more broad definition. Disabilities, which

⁵ 63 FR 2000 (Jan. 13, 1998)



limit a major life activity, are identified on an individual basis and are based not on the *existence* of a disability, but rather the *impact* that the disability has on an individual.

Impairment is identified when the conditions, manner, or duration under which a major life activity can be performed by an individual are limited when compared to most people. Some general types of disabilities or impairment are visual, hearing, mobility, cognitive, psychiatric, speech, learning in nature, in addition to numerous non-visible impairments.

The use of the term *disability* instead of *handicap* or the phrase *individual with a disability* instead of "handicapped individual" represents an effort by the US Congress and others to make use of up-to-date, currently accepted terminology that does not define people by their disabilities. As with racial and ethnic epithets, the choice of terms to apply to a person with a disability is overlaid with stereotypes, patronizing attitudes, and other emotional connotations. California vehicle code §22511.9 requires that parking signage installed since the passage of the ADA in 1992 not use the term *handicapped*.

Many individuals with disabilities, and organizations representing such individuals, object to the use of such terms as *handicapped* or *the handicapped*. In other recent legislation, Congress also recognized this shift in terminology, e.g., by changing the name of the National Council on the Handicapped to the National Council on Disability (Pub. L. 100- 630). Other comparative illustrations include use of the antiquated term “crippled” rather than *disabled* or “mentally retarded”, rather than *cognitively impaired*. The characterization of a person who has an impairment, in comparison to persons with conditions that do not limit one or more major life activities, is illustrated in the following examples:

Seasonal hay fever:

- a general nuisance for the sufferer
- treated with over-the-counter medication
- duration of condition is limited (seasonal)
- does not significantly curtail activities

Multiple Chemical Sensitivities

- severe, debilitating symptoms
- individual unable to be out in public places
- activities significantly curtailed

This person has a disability.

A broken leg with a cast

- Duration of injury limited
- Activities only moderately curtailed
- Normal activities can be performed with certain simple modifications (crutches)

A severe leg fracture



- Requires multiple surgeries and extensive physical therapy
- Lengthy duration of treatment
- Activities significantly curtailed
- Individual unable to care for themselves

This person has a disability.

The ADA and FEHA define three general categories of disabilities; as follows:

- 1) Individuals with *commonly regarded* disabilities such as chronic medical illnesses, heart disease, cerebral palsy, multiple sclerosis, HIV/AIDS, arthritis or alcoholism,
- 2) Individuals with *a history or record* of having such an impairment including cancer survivors, etc. or individuals with a history of treatment for mental illness. Drug addiction is considered a disability but in order to be protected by the ADA, the individual must be either successfully rehabilitated or currently participating in a treatment program. Persons who use methadone as a part of a treatment program are protected, as well as individuals who use controlled substances under the care of a licensed physician. Persons who currently engage in the use of illegal drugs can be denied access to programs, services, or activities,
- 3) Individuals *perceived or regarded* as having a disability. These individuals generally have no disability but are discriminated against due to fear, myth or stereotyping. An example of this type of disability is an individual who has severe facial scars as a result of burns, who repeatedly experiences rejection when applying for employment due to his/her physical appearance. This person is protected by the ADA.

Physical characteristics, such as eye color or skin color are not considered to be physical or mental impairments. Disadvantages of an environmental, cultural, or economic nature are also not considered to be physical or cognitive impairments. Age, in and of itself, is not impairment although the elderly comprise the largest percentage of persons with disabilities in the US. The ADA also extends its protection to people who do not have disabilities themselves but are discriminated against on the basis of their association with a person with a disability.

A person who experiences this type of discrimination, referred to as *associational discrimination* has the right to relief under the ADA but is not entitled to request reasonable accommodation in employment, as people who have disabilities themselves are entitled to do. The above-mentioned information is not intended to be an all-inclusive list of disabilities that are covered under the ADA. It is recognized that other conditions may be identified that would fall under these definitions.



2. QUALIFIED INDIVIDUALS AND ELIGIBILITY

The presence of a disability is not, in and of itself, an automatic qualification for use of or admittance to any or all programs, services or activities offered by the city of Citrus Heights. Persons with disabilities must also possess the qualifications required for participation by other individuals in programs, services and activities. A *qualified individual* with a disability is defined as an individual who meets the **essential eligibility requirements** that the public entity has set forth as required to receive benefits and services or participate in its programs or activities.

The individual should also be eligible to receive those same benefits and services or participate in those same programs or activities with or without reasonable modifications made to policies, practices, or procedures by the public entity. Reasonable modifications that will enable an individual with a disability to participate in a program, service and activity that Citrus Heights provides may include the removal of structural, architectural, communication, or transportation barriers, or the provision of auxiliary aids and assistive devices but a person must first qualify for the basic requirements for participation in the program, service or activity provided.

An example of a typical scenario in which this definition of a *qualified individual* applies is as follows: A city or county provides a program for single parents who are looking for a job and having difficulty juggling their parental responsibilities and their job search. The program is very successful and many people apply to use the program. One person interested in joining the program is a person with a hearing impairment; she/he applies to use the job placement program created for use by single parents. This particular person with a hearing impairment has a verified disability but is not a single parent and therefore, is not a *qualified individual* whose right to participate in the program is protected by the ADA. The person needed to be a single parent, in order to make use of the program.

For the purposes of employment, a *qualified individual* with a disability is an individual who can perform the essential functions of the job, either held or sought, with or without reasonable accommodation. No unqualified job applicant or employee with a disability can claim employment discrimination under the ADA. Employees must meet all the requirements of the job and be able to perform the essential functions of the job with or without reasonable accommodation. Even so, the ADA does not that an accommodation be provided, if it would result in an undue hardship on the employer.



3. PROGRAM ACCESSIBILITY

Under Title II, a public entity must operate each program, activity, or service in such a manner that, *when viewed in its entirety*, it is readily accessible to and usable by individuals with disabilities, unless achieving accessibility would cause a fundamental alteration in the nature of the program, activity, or service. This creates a focus on the programs, services and activities that the city of Citrus Heights provides, rather than the facilities in which they provide them in. The City is also not required to provide access to programs, services or activities where the mitigation of barriers would result in undue financial or administrative burdens to the entity, or either threaten or destroy the historic significance of an historic facility.

In practical terms, this means that pursuing physical barrier removal to improve accessibility is not the only option provided by the ADA for public entities. Other methods such as modifications to policies and practices can be implemented along with or independent of physical barrier removal in order to achieve accessible programs, services and activities. This standard for Title II public entities is known as *program accessibility*. Methods used to achieve program accessibility include but are not limited to: relocating services to accessible buildings, providing new equipment, redesigning existing equipment, assigning aides to individuals with disabilities, providing home visits, making alternative formats available, delivering services at alternate accessible sites, altering existing facilities, pursuing physical barrier removal and/or constructing new facilities.

An example of how program accessibility can be provided is as follows: a county Health and Human Services Department (HHS) that provides Women/Infant/Children (WIC) services at 5 different physical locations that are not accessible to people with mobility impairments. This WIC program is sponsored and funded by the county and federal government, but 2 of the physical buildings where the WIC program is offered are in parts of the county where no public transportation exists, and the buildings themselves have physical barriers to access that prevent persons using wheelchairs from entering. Per the ADA, the county is not required to make all of the 5 facilities physically accessible, but instead is required to make sure that the WIC program, *when seen in its entirety* is accessible. This means that the county must ensure that some, but not all of the locations where the program is offered are physically accessible and that the people that they serve can make use of the program.

The goal of the ADA is to achieve full integration of individuals with disabilities into the fabric of society. The ADA does not establish preferences for persons with disabilities, as may be perceived by the public at large. Public entities are obligated to provide the most integrated setting possible. Individuals with disabilities cannot be restricted from participating in general activities where separate programs, services or activities are provided expressly for them. Persons with disabilities should be allowed to participate in programs, services and activities with able-bodied persons. The expectation is that individuals with disabilities be given a choice as to which program, service or activity to participate in. When choosing a method (or methods) to provide program access, a public entity must give priority to the method or methods that result in the most integrated setting appropriate to encourage interaction among all users, including individuals with disabilities.



4. DISCRIMINATION IN POLICIES AND PRACTICES

Discrimination against persons with disabilities is prohibited by the ADA in written policies, as well as actual practices. By definition, discrimination can take the form of direct action, actions taken on behalf of the entity under a contractual relationship, such as that between the City of Citrus Heights and a consultant to the City, or actions taken by another Title II entity, such as a county or regional transit authority.

Discriminatory practices or policies can be explicitly exclusionary, although policies that appear to be neutral can also discriminate. For example: Many persons with vision impairments cannot obtain drivers' licenses. Since a drivers' license has become the most common form of personal identification, this poses a problem for persons who cannot obtain a license. Therefore, if a policy is instituted that requires a drivers' license as the only form of identification that persons can use in order to be allowed to participate in any program, service or activity, the policy may indirectly exclude individuals who due to their disability are unable to obtain a drivers' license.

When a public entity engages in licensing or certification, an individual cannot be denied licensure or certification if the person can meet the eligibility criteria. Also, public entities cannot establish criteria for licensing or certification, which have the effect of limiting participation.

If examinations are administered for the certification licensing process, they must take place in a location that is physically accessible to persons with disabilities and in a manner in which persons with vision, hearing or other impairments are provided opportunity to take the examination in the same manner in which other non-disabled persons are provided.

Eligibility criteria, which screen out or tend to screen out persons with disabilities, are prohibited unless such eligibility criteria are vital to providing the service or program. As an example; a program is discriminatory that requires persons with disabilities to be accompanied by an attendant.

Neutral rules such as safety requirements are generally allowed even if they screen out individuals with disabilities. As an example, a minimum level of vision is acceptable as a prerequisite for participation in an archery course or other activities where safety constraints exist and vision is required. In addition, it is not permissible for a public entity to charge persons with disabilities a surcharge to offset the costs of providing accessibility.

General access to electronic information must also be provided for persons with disabilities, including web accessibility. When necessary, individual accommodations must be made in order to offer programs, services and activities that satisfy this requirement. Accessible programs, services and activities that must be provided include, but are not limited to excursions, seminars or courses necessary to complete instruction. New technologies that enable electronic accessibility are to be evaluated on a regular basis as they become available on the market.



5. EFFECTIVE COMMUNICATION AND ALTERNATE FORMATS

The provision of equally effective communication is often one of the greatest challenges to state and local agencies. Section 35.106 requires that the city of Citrus Heights take steps that may be necessary to ensure that communications with applicants, participants and members of the public with disabilities are as effective as communication with others. The requirement is to provide appropriate auxiliary aids and services when necessary to afford people with disabilities an equal opportunity to participate in and enjoy the benefits of the City's program, service or activity.

The City also must allow people with disabilities to request an auxiliary aid or service of their choice and the express choice must be given primary consideration by the City⁶. Furthermore, the City must honor the choice of alternate format unless it can demonstrate that another effective means of communication exists or that use of the means chosen by the person is not required under the ADA. Honoring the request of the person with disabilities is important because of the range of types of disabilities, the variety of auxiliary aids and services available and different circumstances that require effective communication. For example, many courtrooms are now equipped with computer-assisted transcription which can be very useful auxiliary aid for people that are blind, deaf or hard of hearing but can use speech to communicate, but would be useless for those who communicate using sign language.

There are two major categories of programs, services and activities covered by the ADA:

1. Programs, services and activities involving general public contact as part of ongoing operations of the entity, and
2. Programs, services and activities directly administered by the entity for program beneficiaries and participants.

Activities in both categories involve direct communication with the public during public use of the City's facilities. These activities can include telephone contacts, office walk-ins, interviews or web-based interfaces, etc.

This requirement facilitates the goal of inclusion of persons with disabilities but it can be complex. In practical terms, the city of Citrus Heights is required to make and provide all of the documents that it makes public in formats that are accessible to people with impairments. Common types of alternative formats provided by public entities include audio format, Braille, electronic text documents on a CD that are in HTML (hypertext markup language) format⁷, (not in PDF (portable document format)), large print format (min. 18 point Serif font),

⁶ 35.160(b)(2)

⁷ Documents that are intended to be read by the visually impaired using software require alt tags that the software can read and audibly communicate to the user. These tags cannot currently be added to documents saved in PDF but are usable when posted in HTML.



providing persons who serve as readers or note-takers at public meetings and videotaping with real-time captioning. This list of possible alternate formats is not all-inclusive.

Public entities are required to provide interpreter services for activities unless the provision of such services results in a fundamental alteration in the programs, services and activities offered by the entity, or if the provision of such services constitutes an undue financial burden to the entity.

The use of oral and manual interpreters is also an integral part of producing an accessible learning environment. Qualified interpreters must be used and must be able to interpret effectively, accurately and impartially. Interpreters should be able to receptively and expressively interpret as well as possess expertise in any necessary specialized vocabulary.

An interpreter is necessary when the information imparted is complex or length in nature. Factors to take into consideration when deciding whether or not to provide an interpreter are the context of the event, the number of people involved and the importance of the information involved. An example of when an interpreter is necessary is for a patient with a disability in a health clinic where serious medical information must be discussed. Another situation may not require an interpreter, such as that of a visitor with a hearing impairment who purchases food at a cafeteria or persons who must pay a parking ticket who can be adequately served by use of a paper and pencil, even though the particular person normally uses sign language to converse.



6. ADA REQUIREMENTS FOR THE SELF-EVALUATION

Section 35.105 of the Americans with Disabilities Act requires that a public entity to perform a Self-Evaluation prior to 1995, but the City of Citrus Heights was not incorporated until 1997. An original ADA Transition Plan and Self-Evaluation was completed in 2001 by City staff, which has been reviewed and incorporated into this update. SZS Consulting Group has created this updated Self-evaluation using an adaptation of the ADA Tool Kit from the US DOJ that includes requirements specific to California statute and regulation. The adapted ADA Tool Kit is entitled the ADA/California Code of Regulations Title 24 - Best Practices Tool Kit for State and Local Governments (Tool Kit). The updated ADA Transition Plan is contained in a separate document.

The regulations governing this Self-Evaluation are based on those originally found in Section 504 of the Rehabilitation Act of 1973 and the 1991 ADA Standards. The 2010 ADA Standards for Accessible Design did not change the requirements for the Self-evaluation update. According to the US DOJ's ADA Title II Regulations published on September 15, 2010, a Self-Evaluation must provide the following basic requirements:

- A public entity shall evaluate its current services, policies, and practices, and the effects thereof and to the extent that modification of any such services, policies, and practices is required, the public entity shall proceed to make the necessary modifications.
- A public entity shall provide an opportunity to interested individuals, including individuals with disabilities and organizations representing individuals with disabilities, to participate in the Self-Evaluation process by submitting comments.
- A public entity, which employs 50 or more individuals, shall, for at least three years following completion of the Self-Evaluation, maintain on file and make available for public inspection:
 1. A list of the interested individuals consulted,
 2. A description of areas examined and any problems identified,
 3. A description of any modifications made.
- If a public entity has already complied with the Self-Evaluation requirement mandated when implementing Section 504, then the requirements of this section shall apply only to those policies and practices that were not included in the previous Self-Evaluation.

The basic function of the Self-evaluation is to ensure that policies and practices that govern the programs, services and activities that the city of Citrus Heights provides are not discriminatory. Department of Justice regards the process of creating an ADA Transition Plan and Self-Evaluation as a good faith effort to comply with ADA Title II requirements. The



information about physical barriers detailed in the updated ADA Transition Plan is essential to this Self-Evaluation. The physical barrier data must be correlated with the programs, activities and services provided in those same physical locations to create an overall view of how programs, activities and services function at these facilities while defining where physical alterations must take place or changes to policies and procedures must be made to provide access. The ADA intended public entities to combine an evaluation of their physical environment in with an evaluation of the associated policies and procedures, so that a public entity could be seen as a functioning whole.

Policies and procedures that govern programs, activities and services may be non-discriminatory, but if the facility they are located in is not accessible, persons with disabilities may be excluded from participating in those programs, services and activities. That concept is also true for the reverse; if facilities are physically free of barriers, there may be discriminatory policies or practices that prevent persons with disabilities from making use of the otherwise accessible facilities.

This update process began in 2011 provides a comprehensive ADA Transition Plan and Self-evaluation that combines the physical assessment of 7 city campus buildings and 188 bus stops performed in 2004 with the evaluation 54 signalized intersections performed in 2008 with physical assessment of the entire public right-of-way within the city limits performed in 2011. The city campus buildings included in the 2004 ADA Transition Plan include the following:

- City Campus Parking
- Council Chambers
- Kroeger Hall
- Chamber of Commerce/Trellis Hall
- Arbor House
- City Hall and Rose Garden
- Police Station

The 2004 ADA Transition Plan identified many barriers to access that have been mitigated through physical alterations in each of the city campus facilities listed above through extensive alterations projects in each of the buildings. The field updated investigations provided data intended to correlate physical access with policies and practices addressed in the ADA Self-Evaluation. The 2010 ADA Standards require that a Self-Evaluation provide a *description of areas examined and any problems identified*, and the *description of any modifications made*. The comprehensive ADA Transition Plan will provide the systematic and detailed presentation of each barrier that must be removed along with the annual phase in which the barrier will be removed, in order to ensure that programs, services and activities are accessible to people with disabilities.

The barriers identified within the updated ADA Transition Plan will be prioritized and organized into mitigation phases within a paper document in binder format, an MS Access® database and ERSI® ArcGIS geodatabase and city map that can be used to correlate physical barrier removal over a period of annual phases that correspond to the city's budgetary constraints. The Self-evaluation will outline policies and practices that will improve access



where physical barrier removal cannot be used to improve access through the process of program accessibility.

A *Public Notice*⁸ posted at each City campus facility is provided in Appendix A. The intent of the notice was to inform the general public that this ADA Transition Plan update process had been initiated. These notices form part of the public *Statement of Commitment*, which is required of each public entity that performs this process to provide more accessible facilities. Once the ADA Transition Plan/Self-Evaluation process begins, the *Statement of Commitment* and Public Notices serve as evidence of a good faith effort to improve access. Once the process is complete and the ADA Transition Plan/Self-Evaluation is in place, implementation of the transition plan and documentation of such implementation is essential to ensure that the public remains aware of progress being made by the city of Citrus Heights to improve access.

The Civil Rights Division of the United States Department of Justice (DOJ) has worked with communities across the United States to improve access to state and local government for over 3 million people with disabilities. SZS Consulting Group has studied these cases to provide professional services as access consultants using the DOJ guidelines to apply California statute, regulation and case law to facilitate the process of ADA/Access Compliance for state and local agencies.

We have found that, despite good intentions, many communities do not have the knowledge or skills needed to identify barriers to access in their programs, activities, and services. Our clients often seek out our services because they lack expertise in surveying their facilities to identify physical barriers but they often misunderstand the importance of reviewing policies and practices for compliance with the Americans with Disabilities Act (“ADA”), the Fair Housing and Employment Act (FEHA) and California Code of Requirements Title 24 (CCR T24).

We work with our clients to fill their gap in knowledge, so that once our project is complete, they will have the skills to continue the Self-evaluation process into the future. Compliance is not a static condition; programs, services and activities change or grow, and facilities are altered and built over time. This change is typical and it requires on-going monitoring and review by the City to ensure continued compliance.

SZS Consulting Group has adapted this Tool Kit for use in California within the ADA regulatory framework, based on state regulations, statutes and case law to help ensure that California communities better understand the issues involved in providing equal access for people with disabilities, not only under the ADA but in concert with our stringent state requirements. The intent of this Tool Kit is to learn:

- The role and responsibility of an ADA Coordinator
- How to identify red flags that indicate that programs, services and activities may have common ADA or CCR Title 24 compliance problems; and

⁸ §35.106 Notice



- How to remove the barriers and fix the common compliance problems identified.

State and local governments are required to comply with the requirements of Title II of the ADA, which prohibits state and local governments from discriminating on the basis of disability. This Tool Kit provides a sensible approach to help communities achieve compliance.

The Tool Kit is comprised of six areas of policy and practice. The Checklists are designed to help the city of Citrus Heights start the Self-evaluation process by identifying the areas of policy and practice that require further development. SZS Consulting will use the results of the checklists to determine where improvement is required, so that we can further assist the development of the City's Self-evaluation. The Tool Kit Checklists include:

- 1. ADA Coordinator Checklist:** This Checklist helps to determine if agencies are in compliance with basic ADA administrative requirements. It also includes a sample "ADA Notice" and a sample "ADA Grievance Policy" that agencies can adapt for their use in complying with basic ADA administrative requirements.
- 2. General Effective Communication Requirements Under Title II of the ADA:** This Checklist explains what it means for communication to be "effective," which auxiliary aids and services can potentially provide effective communication, and when those auxiliary aids and services must be provided.
- 3. 9-1-1 and Emergency Communications Services:** This Checklist explains how the ADA's effective communication requirements apply to 9-1-1 and emergency communications services. It also assists the agency in identifying common accessibility problems with their 9-1-1 and emergency communications services.
- 4. Website Accessibility:** This Checklist explains how Title II of the ADA applies to state and local government websites, describes technologies people with disabilities use to access the Internet, discusses website design practices that pose barriers to people with disabilities, and identifies solutions that can eliminate these online barriers.
- 5. Physical Accessibility:** This Checklist explains Title II's requirements for providing accessible routes from building entrances to accessible parking and the public rights of way including curb ramps at pedestrian crossings.
- 6. General Emergency Management:** This Checklist explains Title II's requirements for providing emergency policies and procedures. The Checklist can also be used to review existing policies and services for evacuation, training of first responders and emergency shelter management.

Note: This Tool Kit provides an overview of ADA compliance issues for state and local governments. The Tool Kit should be considered a helpful supplement to the regulations and technical assistance materials from the ADA standards and California Code of Requirements Title 24 (CBC). It also does not replace the professional advice or guidance that SZS Consulting Group, architects or attorneys knowledgeable in ADA/CCR T24 requirements can provide. The Tool Kit checklists are provided in Appendix B.



7. CITRUS HEIGHTS PROGRAMS, ACTIVITIES AND SERVICES

SPONSORED PROGRAMS AND NON-SPONSORED PROGRAMS

Programs, services and activities offered by the City of Citrus Heights have been researched and an inventory of City programs, services and activities has been compiled. Some programs, services and activities provided in facilities owned by the City of Citrus Heights are not sponsored by the City. In terms of accessibility, those programs have the same requirements as do the City-sponsored programs. The identification of location, function and persons served by each program, service and activities is essential to fully completing this process and providing a useful Self-Evaluation document. With that information, the identification and evaluation of the policies and practices that govern the administration of these programs, activities, and services can be performed.

The City of Citrus Heights has contracted with SZS Consulting Group to assist with the task of producing an ADA Self-Evaluation as an update to the existing City of Citrus Heights ADA Transition Plan and Self-Evaluation in compliance with both the Americans with Disabilities Act (ADA) requirements and the California Code Requirements Title 24 (CCR) that contains the state accessibility standards. The evaluation process began in November 2004 and culminates in compilation of this Self-Evaluation document in 2011.

Both the information regarding physical barriers identified in the field investigation and the information obtained from the public directly affect the programs, services and activities provided by the City of Citrus Heights. This section of the document identifies these programs, services and activities provided.

PROGRAMS:

- REACH (Residents' Empowerment Association of Citrus Heights) Meetings
- Community Workshops
- City Housing Repair Program
- Senior Volunteer Program
- Senior Health Fair
- Citrus Heights Youth Resource Center
- Sunrise Recreation and Park District
- Citrus Heights Volunteer Programs
 - VIP Program
 - Cadet Program

ACTIVITIES:

- Fundraising Activities



- Sunday Funday
- Community Campout
- Summer Concert Series
- Christmas Tree Lighting
- Citrus Heights Community Marching Band
- 9-11 Day of Remembrance Activity
- Citrus Heights Annual Red, White & Blue Parade
- Fireworks at Sunrise Mall on July 4th
- Annual Halloween Spooktacular Activities
- Citrus Heights Police Activities League

SERVICES:

- Citrus Heights Community Center - rental service
- Building Permits
- “Meals On Wheel” Senior Nutrition Services
- Area 4 Agency on Aging Services
- Spotlight on School Meeting and Services
- Inspection Service
- Business Permit
- Department of Fish and Games (Animal Control Services)

Program Accessibility can be determined for city programs, services and activities that take place in City facilities after the city facility assessments have been performed in the updated facilities.

As part of the public outreach process, SZS Consulting will assist the City of Citrus Heights in formulating, circulating and reviewing voluntary questionnaires. The questionnaires are one way of fulfilling an ADA requirement to solicit public opinion about City of Citrus Heights facilities from the general public, persons with disabilities that use the facilities as well as City staff and supervisors. The questionnaires will be reviewed and tabulated, and the results will be reported within this document.



8. RECOMMENDED CHANGES TO POLICIES AND PROCEDURES

The most significant task that an ADA Self-Evaluation is required to perform is that of reviewing and evaluating the existing policies and procedures. This is done in order to identify policies and procedures that may be discriminatory or to identify areas in which policies and procedures are lacking. That information must be correlated with the physical barrier data to ascertain where program accessibility can be applied through the development of new policies and procedures to improve access for persons with disabilities.

The following information was obtained through use of the ADA/CBC Tool Kit. Recommended changes to existing policies and procedures have been provided by SZS. This draft ADA Self-Evaluation is intended to update the existing City of Citrus Heights ADA Self-Evaluation compiled in 2001. It will remain the discretion of the City of Citrus Heights to develop new City policies and procedures as they see fit.

1. ADA Coordinator Policies and Procedures:

- The ADA Coordinator does *not* investigate all complaints communicated to the government alleging that the City does not comply with the ADA.

Recommendation:

Establish policy to standardize investigation of all complaints. If ADA Coordinator is not responsible, determine who will be responsible.

2. ADA Public Notice:

- The City does *not* post the ADA notice in public areas or make it available in other ways as deemed necessary by the City administration to inform people of the protections of the ADA.
- ADA notice is *not* available in alternate formats (i.e. large print, Braille, audio format, accessible electronic format (e.g., via email, in HTML format on its website))

Recommendation:

Establish policy to post notice to inform people of the protections of the ADA in public locations and to provide the notice in alternate formats.



3. Grievance Procedures:

- The grievance procedure is *not* available in alternate format

Recommendation:

Establish policy to provide the grievance procedure in alternate formats.

4. General Effective Communication

- Interpreters (Sign Language, Oral, and Cued Speech)

- Police Department and City Clerk's office has arranged with vendors to provide interpreting services when needed and employees on staff who are qualified interpreters, but the General Services does not have either.

Recommendation:

Establish policy to provide interpreting services for the General Services department for public meetings.

- The Police Department Staff have been trained, but the City Hall staff (front counter, etc...) who interact with the public have *not* been trained on the correct procedures to follow when a person requests an interpreter.

Recommendation:

Establish policy to train City Hall staff who interact with the public on the correct procedures to follow when a person requests an interpreter.

- Most of their City departments, except Council Agendas, do *not* have policies and procedures in place to handle requests from the general public for documents in Braille, large print, audio recording, and accessible electronic format (that is, an email or compact disc containing the document in plain text, word processing format, HTML or some other format that can be accessed with screen reader software).

Recommendation:

Establish alternate format policy and procedure to handle train requests from the general public for documents in Braille, large print, audio recording, and accessible electronic format.

5. Other Auxiliary Aids and Services:



- The City Council Chambers does have policies and procedures in place to handle requests from the general public for notetakers, computer-assisted real-time transcription services, and other auxiliary aids and services for providing effective communication. The City commented, "Council Chambers has assisted listening devices as well as the Community Center, but need for procedures for regular testing of the equipment and training other staff on the use."

Recommendations:

- 1) Establish policy and procedure to handle requests from the general public for notetakers, computer-assisted real-time transcription services, and other auxiliary aids and services for providing effective communication.
- 2) Develop procedures for regular testing of the equipment and training other staff on the use

- The City does *not* have the equipment or arrangements with vendors so that it can provide written materials in alternative formats for the equipment or devices that they provide (e.g. Braille, large print, audio format, electronic format).

Recommendation:

Establish policy or practice with vendor or in-house expertise to provide written materials in alternative formats for the equipment or devices that the City provides.

- The City Council Meetings are shown with the closed captioning on Metro Cable Channel 14, however the video they posted on the website does *not* have the closed captioning.

Recommendation:

Establish practice to post video on City website of City Council Meetings with closed captioning.

6. TTYs (Teletypewriters):

- TTYs are *not* available for the people with hearing and speech disabilities.

Recommendation:

- 1) Establish policy or practice to make TTY's available for the people with hearing and speech disabilities.
- 2) Train City staff to use TTY relay system.



7. Website Accessibility Management - Assessing Current Webpage and Content on the City Website:

- City website pages lack navigation links with a “skip navigation” link at the top of each webpage.

Recommendation:

Establish practice to provide a link at the top of each webpage that allows users to “skip navigation” to provide website accessibility.

- On City website online forms, the City’s HTML tags do *not* describe all of the controls (including all text fields, check boxes, drop-down lists, and buttons) that people can use in order to complete and submit the forms.

Recommendation:

Establish practice to describe all of the controls including all text fields, check boxes, drop-down lists, and buttons so that forms can be completed and submitted.

- On City website online forms, the City’s default setting in drop-down lists does *not* describe the information being requested instead of displaying a response option (e.g., “your age” instead of “18-21”).

Recommendation:

Establish practice to provide default settings for drop-down lists that describe information, not display response options.

- On City webpage’s data charts or tables, the City’s HTML is *not* used to associate all data cells with column and row identifiers.

Recommendation:

Establish practice to use HTML to associate all data cells with column and row identifiers.

- All video files on the City website do *not* have audio descriptions of what is being displayed to provide access to visually conveyed information for people who are blind or have low vision.

Recommendation:

Establish practice to provide audio descriptions of what is being displayed to provide access to visually conveyed information.

- All video *and* audio files on the City website do *not* have written caption of spoken communication synchronized with the action to provide access to people who are deaf or hard of hearing.

**Recommendation:**

Establish practice to provide video *and* audio files with written caption of spoken communication synchronized with the action shown.

8. Website Accessibility Policy and Procedures:

- The City does *not* have a written policy on website accessibility
 - Due to this lack of a policy, the City has no website accessibility policy posted on their website in a place where it can be easily located.

Recommendation:

Establish a written policy defining website accessibility for the City and post policy on City website in a location that is easily located.

- The City's procedures have *not* been developed to ensure that content is not added to the City website until it has been made accessible.

Recommendation:

Develop procedures to ensure that content is not added to the City website until it has been made accessible.

- The webmaster only checks images to make sure the alternate tags are added; however the webmaster does *not* check the HTML of *all* new webpages to confirm accessibility before the pages are posted.

Recommendation:

Develop procedures to ensure that webmaster checks images to make sure the alternate tags are added and the HTML of all new webpages to confirm accessibility before the pages are posted.

- For documents that are added to the City's website in PDF format, the text-based versions of the documents (e.g. HTML, RTF, or word processing format) are *not* added at the same time as the PDF versions.

Recommendation:

Develop procedures to ensure that text-based versions of all PDF documents are added to the City website at the same time that the PDF versions are added.

- In-house staff and contractors have *not* received information about the website accessibility policy and procedures to ensure website accessibility.
 - In-house and contractor staff have *not* received appropriate training on how to ensure the accessibility of the website.



- In-house and contractor staff who create web content or post it on their website have *not* received copies of the Department of Justice’s technical assistance document “Accessibility of State and Local Government Websites to People with Disabilities”.

Recommendation:

Establish a policy to inform and train in-house staff and contractors on City website accessibility policy and procedures. Also, provide DOJ technical assistance documents to staff when appropriate.

- A specific written plan is *not* including timeframes in place now to make all of their existing web content accessible.

Recommendation:

Establish a written plan including timeframes now to make all of the City’s existing web content accessible.

- The City have *not* posted on their website a plan to improve website accessibility and invited suggestions for improvements.

Recommendation:

Post a public statement of commitment to improve website accessibility and invited suggestions for improvements. Consider using the public outreach portion of the ADA Transition Plan update process to invite suggestions.

- The City has *not* asked disability groups representing people with a wide variety of disabilities to provide feedback on the accessibility of their website.

Recommendation:

Establish a policy to ask disability groups representing people with a wide variety of disabilities to provide feedback on the accessibility of the City website.

- The City has *not* tested their website using one of the products available on the Internet to test website accessibility.

Recommendation:

Develop a procedure to test the City website using one of the products available on the Internet to test website accessibility (<http://www.w3.org/WAI/eval> etc.)

- Alternative ways of accessing web-based information, programs, activities, and services are *not* available for people with disabilities who cannot use computers.

**Recommendation:**

Establish a policy to provide Alternative ways of accessing web-based information, programs, activities, and services are *not* available for people with disabilities who cannot use computers.

9. Physical Accessibility in City Facilities - Evaluating Compliance with the Requirements for Curbs at Pedestrian Crossings:

- All City curbs where sidewalks and walkways intersect with roads, streets, highways do *not* have curb ramps or blended transitions that allow people with disabilities to go from the sidewalk on one side of the vehicular way across any traffic islands with curbs to the sidewalk on the opposite side.
 - All of the City curb ramps and blended transitions are *not* free of accessibility problems.

Recommendation:

Establish a policy or procedure to provide compliance in City pedestrian facilities including

- 1) Curb ramps or blended transitions that allow people with disabilities to go from the sidewalk on one side of the vehicular way across any traffic islands with curbs to the sidewalk on the opposite side.
- 2) Sidewalks
- 3) Bus or transit stops

10. Emergency Management - General Emergency Management Policies and Procedures:

- The City does *not* have written procedures to ensure that they regularly seek and use input from person with a variety of disabilities and organizations with expertise in disability issues in all phases of the City's emergency planning, such as those addressing preparation, notification, evacuation, transportation, sheltering, medical and social services, temporary lodging and/or housing, clean-up, and remediation. The City commented, "In progress with grant. Resource list has been created and identified and includes the above line items."
 - The City does *not* seek input and participation from people with disabilities and organizations with expertise on disability issues when they City stage emergency simulations and otherwise test their preparedness.

**Recommendation:**

Establish a policy to regularly seek and use input from person with a variety of disabilities and organizations with expertise in disability issues in all phases of City emergency planning and testing of preparedness procedures.

11.Planning for Emergency Notification and Evacuation:

- For planning purposes, the City has *not* determined the extent to which, in an emergency or disaster, people with disabilities who reside or visit their community are likely to need individualized notification, evacuation assistance, and/or transportation, including accessible transportation. The City commented, “In progress with EOP Grant. Request has been made to the county In Home Support Services resource.”
 - The City’s emergency planning has *not* identified the resources they will use to meet the needs of individuals with disabilities who require individualized notification, evacuation assistance, and/or transportation, including accessible transportation. The City commented, “In progress.”

Recommendation:

Develop procedures to identify people with disabilities who reside or visit their community are likely to need individualized notification, evacuation assistance, and/or transportation, including accessible transportation.

- Where the City’s emergency warning systems use sirens or other audible alerts, The City does *not* have written procedures to ensure the use of a combination of methods to provide prompt notification of emergencies to persons who are deaf or hard of hearing.

Recommendation:

Establish written procedures to ensure the use of a combination of methods to provide prompt notification of emergencies to persons who are deaf or hard of hearing.

- The City does *not* have written procedures to ensure that their community evacuation plans enable people with a wide variety of disabilities to safely self-evacuate and, for those who cannot self-evacuate, to receive evacuation assistance.

**Recommendation:**

Establish written procedures to ensure that community evacuation plans enable people with a wide variety of disabilities to safely self-evacuate and, for those who cannot self-evacuate, to receive evacuation assistance.

- The City has *not* established a voluntary, confidential registry for persons with disabilities to request individualized notification, evacuation assistance, and transportation.

Recommendation:

Establish a voluntary, confidential registry for persons with disabilities to request individualized notification, evacuation assistance, and transportation. Consider discussing this in the public outreach portion of the ADA Transition Plan process.

- The City's emergency transportation plan does *not* identify accessible transportation resources that will be available to evacuate persons with mobility disabilities, including people who use wheelchairs or scooters, people who use medical equipment, such as oxygen tanks, and people who use service animals. The City also commented, "It will be incorporated."

Recommendation:

Establish emergency transportation plan does *not* identify accessible transportation resources that will be available to evacuate persons with mobility disabilities.

- The City's emergency plans, policies, and procedures do *not* provide for people with disabilities to be evacuated and transported to shelters together with their families. The City also commented, "In progress."
 - The City's emergency management plans, policies, and procedures do *not* ensure that people with disabilities are not separated from their service animals during evacuation and transportation.

Recommendation:

Establish emergency plans, policies, and procedures to ensure that people with disabilities to be evacuated and transported to shelters together with their families and service animals.

12. Training First Responders, Staff, and Volunteers:

- Staff and volunteers who participate in notification activities have *not* been trained as first responders. The City added comment, "Planned 2nd Quarter."

**Recommendation:**

Establish policies and procedures to ensure that staff and volunteers who participate in notification activities are trained as first responders in the following categories:

- 1) Staff and volunteers who deal with evacuation, transportation, and emergency-related security issues,
- 2) Shelter staff and volunteers and those who will be involved in routing people to shelters and deciding shelter placements for people with disabilities and their families,
- 3) Individuals involved in establishing and operating temporary housing or lodging programs,
- 4) Individuals who will establish and operate emergency-related medical and social service programs, and
- 5) Individuals who will be responsible for repair, rebuilding, and continuity of programs operations following an emergency or disasters.

13. Physical Accessibility in Emergency Shelter Programs:

- The City has *not* conducted an accessibility survey of all of their emergency shelter facilities, whether owned by government or a private entity to determine if they comply with the most stringent requirements of the CBC and ADA Standards.
 - The City has *not* identified access barriers at any of the shelter facilities.

Recommendation:

Conduct an accessibility survey of all of the City's emergency shelter facilities to determine if they comply with the most stringent requirements of the CBC and ADA.

- Until all emergency shelters have the required accessible features referenced above, the City has *not* identified and widely publicized to the public and to persons with disabilities and disability organizations the most accessible emergency shelters and the accessible features that each shelter has.

Recommendation:

After an accessibility survey has been completed for the City's emergency shelter facilities, develop policies and procedures to publicize to the public and to persons with disabilities and disability organizations the most accessible emergency shelters and the accessible features that each shelter has. Consider the role that fire stations play in providing emergency shelter facilities.



- The City has *not* adopted policies and procedures to ensure that shelter staff and volunteers maintain accessible routes for individuals who use wheelchairs and other mobility aids.

Recommendation:

Develop and adopt policies and procedures to ensure that shelter staff and volunteers maintain accessible routes for individuals who use wheelchairs and other mobility aids.

- The City has *not* adopted procedures to minimize protruding objects and overhead objects in shelters so that someone who is blind or has low vision can walk safely throughout the shelter area.

Recommendation:

Conduct an accessibility survey of all of the City's emergency shelter facilities to identify and minimize protruding objects and overhead objects in shelters so that someone who is blind or has low vision can walk safely throughout the shelter.

- The City has *not* adopted policies and procedures for shelter staff and volunteers to offer way finding assistance to people who are blind and those with low vision who may need assistance in understanding and navigating the shelter layout and locating shelter facilities.

Recommendation:

Develop and adopted policies and procedures that enable shelter staff and volunteers to offer way finding assistance to people who are blind and those with low vision who may need assistance in understanding and navigating the shelter layout and locating shelter facilities.

- The City has *not* established policies and procedures to ensure that, in the future, facilities are surveyed for accessibility and barriers to access are removed before a facility is designated as a shelter.

Recommendation:

Establish policies and procedures to ensure that, in the future, facilities are surveyed for accessibility and barriers to access are removed before a facility is designated as a shelter. Consider the role that fire stations play in providing emergency shelter facilities and the importance of vertical access (elevators) in these facilities.

14.Policies and Procedures in Emergency Shelters:

- The City does *not* have supplies of informational materials routinely handed out at emergency shelters available in alternative formats for people who are blind or have low vision.

**Recommendation:**

Develop alternate formats for informational materials routinely handed out at emergency shelters for people with vision impairments.

- The City has *not* adopted policies and procedures for shelter staff and volunteers to provide assistance to people who are blind or have low vision by reading and completing forms and other written materials that are not available in alternative formats.

Recommendation:

Develop and adopt policies and procedures for shelter staff and volunteers to provide assistance to people who are blind or have low vision by reading and completing forms and other written materials that are not available in alternative formats. These tasks could be similar to note taker tasks used for other City functions.

- None of the City shelters have low-stimulation “stress-relief zones,” such as an empty classroom in a school building that can be used as an emergency shelter.

Recommendation:

Establish policies and procedures to provide low-stimulation “stress-relief zones” as part of an emergency shelter facility.

- The City has *not* adopted emergency shelter eligibility policies and procedures to ensure that people with disabilities are housed at “mass care” shelters unless they are medically fragile.

Recommendation:

Develop and adopt emergency shelter eligibility policies and procedures to ensure that people with disabilities are housed at “mass care” shelters unless they are medically fragile to ensure that they remain in shelters with their neighbors, etc.

- The City has *not* adopted “mass care” shelter procedures to ensure that shelter staff and volunteers do not turn away people with disabilities who may need assistance with activities of daily living even though their personal care aides may not be with them.

Recommendation:

Develop and adopt “mass care” shelter procedures to ensure that shelter staff and volunteers provide assistance to people with disabilities who may need assistance with activities of daily living even though their personal care aides may not be with them.

- The City has *not* adopted policies and procedures to ensure that “mass care,” “special needs,” and “medical” shelter staff and volunteers are trained and



monitored so they provide safe, appropriate assistance with activities of daily living that some people with disabilities may require.

Recommendation:

Develop and adopt policies and procedures to ensure that shelter staff and volunteers trained to handle “mass care,” “special needs,” and “medical” needs are trained and monitored so they provide safe, appropriate assistance with activities of daily living that some people with disabilities may require.

- The City’s shelter staff and volunteers have *not* received training with site-specific instructions for providing people with disabilities access to all services, activities, and programs at “mass care,” “medical,” and “special needs” shelters.

Recommendation:

Establish policies and practices for training staff and volunteers with site-specific instructions for providing people with disabilities access to all services, activities, and programs at “mass care,” “medical,” and “special needs” shelters.

- The City does *not* have written policies and procedures to ensure that people who are deaf or hard of hearing, people with speech disabilities, and people who are blind or have low vision are provided with effective communication during their stay at a shelter.

Recommendation:

Develop written policies and procedures to ensure that people who are deaf or hard of hearing, people with speech disabilities, and people who are blind or have low vision are provided with effective communication during their stay at a shelter.

- The City does *not* provide a TTY at each emergency shelter for use by people who are deaf, are hard of hearing, or have speech disabilities.

Recommendation:

Develop policies to provide a TTY or other similar technology at each emergency shelter for use by people who are deaf, are hard of hearing, or have speech disabilities. Consider asking for input on which technologies are useful to people with disabilities in these settings. TTY units may no longer be used by large segments of the population.

- The City does *not* have written procedures to ensure that persons with disabilities who use service animals are not separated from their service animals when using emergency shelters and have full access to shelter programs, services, and activities, even if pets are normally prohibited in shelters or in certain areas of shelters.



- The City does *not* have written procedures to ensure that food, water, and a receptacle and plastic bags for the disposal of service animal waste are available at emergency shelters.
- The City has *not* established security procedures at shelters that allow people with service animals to take their animals outside for relief without unnecessary delays for security screening upon re-entry.

Recommendation:

Develop and adopt policies, practices and training for shelter staff and volunteers to ensure that persons with disabilities who use service animals are not separated from their service animals when using emergency shelters and have full access to shelter programs, services, and activities, even if pets are normally prohibited in shelters or in certain areas of shelters.

- 1) Establish policies to ensure that food, water, and a receptacle and plastic bags for the disposal of service animal waste are available at emergency shelters.
- 2) Establish security procedures at shelters that allow people with service animals to take their animals outside for relief without unnecessary delays for security screening upon re-entry.

- The City's emergency management plan does *not* provide an effective way for people with disabilities to request and receive durable medical equipment and medication while in shelters.

Recommendation:

Develop and adopt emergency management plan that provides an effective way for people with disabilities to request and receive durable medical equipment and medication while in shelters.

- The City has *not* established procedures for people with disabilities to request and receive cots or beds, modifications to cots or beds, securement of cots or beds to allow safe transfer to a wheelchair, and placement of cots or beds in specific locations when needed.

Recommendation:

Establish procedures for people with disabilities to ensure that they can request and receive cots or beds or modifications needed to allow safe transfer to a wheelchair, and placement of cots or beds in specific locations when needed.

- The City has *not* adopted kitchen access policies to provide immediate access to food and refrigerated medications for shelter residents and volunteers whose disabilities may require it.

**Recommendation:**

Develop and adopt kitchen access policies to provide immediate access to food and refrigerated medications for shelter residents and volunteers whose disabilities may require it.

- The City's emergency management plan does *not* ensure that at least some kinds of foods and beverages are available in emergency shelters for people with dietary restrictions, such as people who have diabetes or severe food allergies.

Recommendation:

Develop and adopt emergency management plan ensures that at least some kinds of foods and beverages are available in emergency shelters for people with dietary restrictions, such as people who have diabetes or severe food allergies.

15. Medical and Social Services:

- The City has *not* established policies and procedures to ensure that medical and social services and other benefit programs are accessible to people with disabilities, including people who use wheelchairs, scooters, and other mobility aids, individuals who cannot leave shelters because of their disabilities, and people who use service animals.

Recommendation:

Establish policies and procedures to ensure that medical and social services and other benefit programs are accessible to people with disabilities.

- The City has *not* established policies and procedures to ensure that application processes for benefit programs are designed so they do not exclude people with disabilities whose disabilities prevent them from using one particular type of application process.

Recommendation:

Establish policies and procedures to ensure that application processes for benefit programs are designed so they do not exclude people with disabilities whose disabilities prevent them from using one particular type of application process. Consider alternate formats as part of this process.

- The City does *not* have policies and procedures to ensure that their medical, social service, and other benefit programs provide effective communication



to people with disabilities, including people who are deaf or hard of hearing and people who are blind or have low vision.

Recommendation:

Establish policies and procedures to ensure that medical, social service, and other benefit programs provide effective communication to people with disabilities.

- The City's policies and procedures do *not* include primary consideration of the communication method preferred by an individual with a disability.

Recommendation:

- Establish policies and procedures that include primary consideration of the communication method preferred by an individual with a disability.

16. Post-Sheltering Policies and Procedures:

- The City has *not* adopted procedures to provide additional time, transportation, and search assistance for people with disabilities in emergency shelters to locate accessible temporary housing and support services in the community following an emergency.

Recommendation:

Develop and adopt procedures to provide additional time, transportation, and search assistance for people with disabilities in emergency shelters to locate accessible temporary housing and support services in the community following an emergency.

- The City has *not* adopted a plan for providing prompt, equivalent temporary housing to persons with disabilities, including accessible housing for people who use wheelchairs, scooters, and other mobility aids and people who are deaf or hard of hearing.

Recommendation:

Develop and adopt a plan for providing prompt, equivalent temporary housing to persons with disabilities, including accessible housing for people who use wheelchairs, scooters, and other mobility aids and people who are deaf or hard of hearing.

17. Post-Emergency Repair, Rebuilding, and Resumption of Programs Operations:

- The City has *not* established policies to ensure that programs relocated from a damaged facility on a temporary or permanent basis remain accessible to people with disabilities.



Recommendation:

Develop and established policies to ensure that programs relocated from a damaged facility on a temporary or permanent basis remain accessible to people with disabilities. Coordinate updated ADA Transition Plan data with efforts to relocate programs.

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SAMPLE PUBLIC NOTICE



DRAFT PUBLIC NOTICE

THIS FACILITY IS INCLUDED IN THE **AMERICANS WITH DISABILITIES ACT (ADA) TRANSITION PLAN** CURRENTLY BEING IMPLEMENTED BY THE CITY OF SACRAMENTO GOLF FACILITIES. ARCHITECTURAL BARRIERS TO CITY OF SACRAMENTO PROGRAMS HAVE BEEN IDENTIFIED AND ARE SCHEDULED FOR REMOVAL.

SHOULD YOU HAVE ANY QUESTIONS, COMMENTS, COMPLAINTS, OR REQUESTS CONCERNING PHYSICAL ACCESS AT THIS FACILITY, PLEASE CALL THE OFFICIAL RESPONSIBLE:

NAME: MR. DAVID WHEATON
TITLE: GENERAL SERVICES DIRECTOR
AGENCY: CITY OF CITRUS HEIGHTS
ADDRESS: 6237 FOUNTAIN SQUARE DRIVE
CITRUS HEIGHTS, CA 95621
TEL: (916) 727-4770
HOURS: HOURS VARY

FOR ANY OTHER QUESTIONS REGARDING PROVISIONS OF THE **ADA**, PLEASE CALL:

NAME: MS. AMY VAN
TITLE: CITRUS HEIGHTS ADA COORDINATOR
AGENCY: CITY OF CITRUS HEIGHTS
ADDRESS: 6237 FOUNTAIN SQUARE DRIVE
CITRUS HEIGHTS, CA 95621
TEL: (916) 725-2448
HOURS: 8:30 A.M. – 5:30 P.M.

THIS NOTICE IS ALSO AVAILABLE IN LARGE PRINT, ON AUDIO TAPE AND IN BRAILLE. PLEASE CONTACT THE CITY ADA COORDINATOR LISTED ABOVE TO OBTAIN THIS NOTICE IN ALTERNATE FORMATS.

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ADA/CBC TOOL KIT RESPONSES

ADA Coordinator Checklist

- 1. Does the City have an ADA Coordinator? All state and local governments with 50 or more employees are required to designate at least one responsible employee to coordinate ADA compliance.**

Yes, the state or local government has an ADA Coordinator.

No, the state or local government does not have an ADA Coordinator but an ADA Coordinator is not required because the public entity has fewer than 50 employees, including all part-time and full-time employees.

No, the state or local government does not have an ADA Coordinator even though it has 50 or more employees.

- 2. Does the ADA Coordinator have the time and expertise necessary to coordinate the government's efforts to comply with and carry out its responsibilities under the ADA?**

Yes

No

- 3. Does the ADA coordinator actually carry out these duties?**

Yes

No

- 4. Does the ADA Coordinator investigate all complaints communicated to the government alleging that the City does not comply with the ADA?**

Yes

No

If not, do other designated city staff perform investigations?

Yes

No

- 5. Does the ADA Coordinator or designated city staff document each investigation in written form?**

Yes

No

6. Does the City make available to all interested people the name, office address, and telephone number of the ADA Coordinator?

Yes

No

ACTIONS:

If you checked “no” for any of the questions above, here are some steps you can take to improve the coordination of your ADA compliance:

- *Ensure that the ADA Coordinator has the time and expertise necessary to coordinate the government’s efforts to comply with and carry out its responsibilities under the ADA.*
- *The ADA Coordinator could consider joining national organizations that train and fellowship ADA Coordinators, such as the National Association of ADA Coordinators (NAADAC at <http://askjan.org/naadac/>).*
- *Ensure that the ADA Coordinator actually carries out these duties.*
- *Ensure that the ADA Coordinator investigates all complaints communicated to the government alleging that the government does not comply with the ADA.*
- *Make available to all interested people the name, office address, and telephone number of the ADA coordinator.*

ADA Public Notice

1. Does the City make information available to the general public regarding the fact that the ADA applies to the services, programs, and activities of the government?

Yes 

No

2. Does the City use the Department of Justice’s model “Notice Under the Americans with Disabilities Act” or a similarly comprehensive notice?

Yes

No

3. Does the City post this information in public areas or make it available in other ways as deemed necessary by the City administration to inform people of the protections of the ADA?

Yes

No

4. Is the ADA notice available in alternate formats – i.e., large print, Braille, audio format, accessible electronic format (e.g., via email, in HTML format on its website)?

Yes

No

ACTIONS:

If you checked “no” for any of the questions above, your office may be violating the requirement for providing notice.

- *Make information available to all interested members of the general public regarding the prohibition of discrimination against people with disabilities.*
- *Consider using the Department of Justice’s model “Notice Under the Americans with Disabilities Act,” or use a similarly comprehensive notice.*
- *Make this information available by posting it in common areas of public buildings, posting it on the government’s website, or otherwise disseminating it as necessary to inform the public of the ADA’s protections.*
- *Make the ADA notice available in alternate formats.*

Grievance Procedures

1. Does the City have a formal grievance procedure? All state and local governments with 50 or more employees are required to adopt and publish grievance procedures providing for prompt and fair resolution of complaints of discrimination on the basis of disability.

Yes, the state or local government has a grievance procedure.

No, the state or local government has fewer than 50 employees, including part and full time, and is not required to have a grievance procedure.

No, the state or local government does not have a grievance procedure even though it has 50 or more employees.

2. Does the City use the Department of Justice’s model “Grievance Procedure under the Americans with Disabilities Act” or a similarly comprehensive grievance procedure (i.e., a grievance procedure for complaints made by any member of the public under the ADA related to any program, service, or activity)?

Yes

No

Not applicable, no grievance procedure is required because the public entity has fewer than 50 employees.

3. Is the grievance procedure available in alternate formats?

Yes

No

ACTIONS:

If the local government has fewer than 50 employees, it is not required to have a grievance procedure. HOWEVER, it is strongly recommended that a grievance procedure be adopted and published by all localities subject to title II of the ADA.

If the state or local government has 50 or more employees, it must have a published grievance procedure. Any state or local government that does not have a grievance procedure is in violation of federal law. A grievance procedure must be adopted and published.

- *Consider using the Department of Justice’s model “Grievance Procedure under the Americans with Disabilities Act,” or use a similarly comprehensive grievance procedure.*
- *Provide copies of your procedure in alternate formats upon request.*

Title II Checklist (General Effective Communication)

Interpreters (Sign Language, Oral, and Cued Speech)

- 1. Does each department of your state or local government have a policy and procedures in place to deal with requests from the general public for sign language, oral, and cued speech interpreters?**

Yes

No

- 2. If policies and procedures are in place, do they:**

- a. Specify that sign language, oral, and cued speech interpreters can be obtained within a short period of time when necessary? (For example, when needed for emergency situations, interpreters should be available either in person or by using video relay systems within a reasonable period of time, 24 hours a day, 7 days a week – in this setting, reasonable usually means within an hour of a request. In non-emergency situations, a public entity can require reasonable advance notice for interpreter requests.)**

Yes

No

- b. Make clear that it is generally inappropriate to request family members and companions of deaf persons to serve as sign language interpreters?**

Yes

No

- c. Specify that deaf persons requesting interpreters should not be charged for the cost of the interpreter?**

Yes

No

- d. Specify that the public entity's decision to deny an interpreter based on undue financial and administrative burden must be made after considering all resources available for use in funding the operation of the program and must be accompanied by a written statement of the reasons for reaching the conclusion?**

Yes

No

- e. **Specify that, in any instance where the provision of an interpreter would result in an undue financial and administrative burden, the City will take any other action that would not result in an undue financial and administrative burden but would nevertheless ensure that the individual with a disability receives the benefits or services provided?**

Yes

No

3. **Does your City have employees on staff who are qualified interpreters or have arrangements with one or more vendors to provide interpreting services when needed?**

Yes



No

4. **Have the employees who interact with the public been trained on the correct procedures to follow when a person requests an interpreter?**

Yes



No

5. **Review documentation and speak with City personnel responsible for responding to requests for interpreter services. When requests for interpreters have been made in the past, were they granted:**

- a. **For events such as meetings, interviews, hearings, medical appointments, court proceedings, and training and counseling sessions?**

Yes

No

- b. **Without the City asking the individual who requested the interpreter charged to pay for the services?**

Yes

No

ACTIONS:

If you checked “no” to any of the questions above, these are red flags indicating that your City may not be complying with the effective communication requirements of Title II of the ADA.

- *If your City does not have policies and procedures on the provision of interpreters, they need to be established.*
- *If your entity has policies and procedures, make sure they include the following provisions:*
 - *Sign language, oral, and cued speech interpreters can be obtained within a short period of time when necessary. In emergency situations, sign language interpreters will be available either in person or by using video relay systems within a reasonable period, 24 hours a day, 7 days a week – usually, within an hour of receiving the request. In non-emergency situations, sign language interpreters will be available when reasonable advance notice is provided.*
 - *Family members and companions of deaf persons will not be asked to serve as sign language interpreters.*
 - *Deaf persons requesting interpreters will not be charged or asked to pay for the cost of an interpreter.*
 - *In situations where agency personnel believe that an undue financial and administrative burden may be involved, the decision to deny an interpreter will be made considering all funding available for the operation of the program.*
 - *Where undue financial and administrative burden is the basis for the denial of an interpreter, the agency will take any other action that would not result in an undue financial and administrative burden but would ensure that the individual with a disability receives the benefits or services provided.*
- *Make the policy and procedures on the provision of interpreters available to your employees and the public by posting it on your entity’s website.*
- *Train employees so they know the policies and the appropriate procedures to follow when they receive a request for an interpreter.*
- *Make arrangements with vendors or hire employees so interpreters are available when needed.*

Other Auxiliary Aids and Services

- 6. Does your City have policies and procedures in place to deal with requests from the general public for documents in Braille, large print, audio recording, and accessible electronic format (that is, an**

email or compact disc containing the document in plain text, word processing format, HTML or some other format that can be accessed with screen reader software)?

Yes



No

- 7. Does your City have policies and procedures in place to deal with requests from the general public for notetakers, computer-assisted real-time transcription services, and other auxiliary aids and services for providing effective communication?**

Yes



No

- 8. Does your City have the equipment or arrangements with vendors so it can provide written materials in alternative formats for the equipment or devices that they provide (e.g., Braille, large print, audio format, electronic format)?**

Yes

No

- 9. Does your City provide written materials in alternative formats when asked to do so? (For example, does your entity communicate with blind people by using Braille, large print, or email when asked to do so?)**

Yes

No

- 10. Does your City give primary consideration to the requests of the person with a disability when determining what type of auxiliary aid or service to provide?**

Yes

No

- 11. Does your City ensure that all videos and television programs it produces and all videos it makes available to the public on its internet website are available with captioning and audio description?**

Yes

No



ACTIONS:

If you checked “no” for any of the questions above, your state or local government may not be providing effective communication. Consider taking the following steps:

- *Ensure that policies and procedures are in place to provide auxiliary aids and services needed to ensure effective communications. Policies and procedures should address common requests, such as*
 - 1) *Making documents available upon request in Braille, large print, audio recording, and an accessible electronic format, and*
 - 2) *Providing notetakers, computer-aided real-time transcription, assistance in reading and completing forms, and other common auxiliary aids and services.*
- *Ensure that your City’s policies and procedures require decision makers to give primary consideration to the auxiliary aid or service requested by the person with a disability when deciding which auxiliary aid or service to provide.*
- *Purchase equipment or make arrangements with vendors so that documents can be provided in alternative formats when requested.*
- *Make all videos and television programs that your entity produces, distributes, or makes available to the public accessible to people with hearing and vision disabilities by providing captioning and audio description of important visual images, unless doing so would be a fundamental alteration of your program or impose an undue financial and administrative burden.*
- *Train your City’s employees who interact with the public so they know what to do when they receive a request for an auxiliary aid or service.*
- *Publish your effective communication policy on the City’s website in an accessible format so people with disabilities know about any reasonable advance notice requirements that your entity adopts.*
- *Meet with people in your community who have different disabilities to find out how well your City’s effective communication policies and procedures are working and to solicit suggestions for improvement.*

TTYs (Teletypewriters)

12. Where telephones are available to the public for making outgoing calls, are TTYs available for people with hearing and speech disabilities?

Yes

No

13. Does your state or local government handle calls placed using a Telecommunications Relay Service or a Video Relay Service in the same way as other telephone calls?

Yes

No

ACTIONS:

If you checked “no” for either of the questions above, your entity may be violating the requirement for providing equally effective telecommunication systems for people with hearing and speech disabilities.

- *Provide access to a TTY wherever telephones are available for making outgoing calls.*
- *Provide written policies and training to employees who answer the telephone to ensure that incoming calls made through a relay service are handled as quickly and effectively as other calls.*
- *Provide training to implement the policies. Practice use of the policies in place with the devices to ensure that the policy is understood and functions as intended.*
- *Meet with deaf people in your community to find out their experiences when using a relay service to call your entity.*

Title II Checklist (9-1-1 and Emergency Communications Services)

TTY-Compatible Equipment

1. Do you have a TTY or TTY-compatible equipment at every emergency communications services call-taking position?
☒ Yes
☐ No
2. Do you have procedures for maintaining TTYs and TTY-compatible equipment that are as effective as the maintenance procedures for voice telephone equipment?
☒ Yes
☐ No
3. If you have a plan for back-up equipment in case of equipment malfunctions, telephone line malfunctions, or power failure, does that plan cover TTY calls and equipment?
☒ Yes
☐ No

ACTIONS:

If you checked "no" to any of the preceding questions, your office may be violating the requirement for providing equally effective emergency communications services.

- *Ensure that a working TTY or TTY-compatible equipment is provided at every emergency communications position.*
- *Develop procedures for maintaining TTYs and TTY-compatible equipment that are as effective as the maintenance procedures for voice telephone equipment.*
- *If you have a plan for back-up equipment in case of equipment malfunctions, telephone line malfunctions, or power failure, ensure that the plan covers TTY calls and equipment*

Equal Access

4. Is the response time of the telephone emergency services provided for TTY users equal to the response time of the services provided to others?
- ☒ Yes
- ☐ No
5. Is the response quality of the telephone emergency services provided for TTY users equal to the response quality of the services provided to others?
- ☒ Yes
- ☐ No
6. Are the hours of operation of the telephone emergency services provided for TTY users equal to the hours of operation of the services provided to others?
- ☒ Yes
- ☐ No
7. If the telephone emergency services provide additional features (such as automatic number identification, automatic location identification, automatic call distribution), are the features provided to TTY users equal to the features provided to others, whenever feasible? (Feasibility should be determined based on the availability of technology in the marketplace to perform the function for communications received from TTY users.)
- ☒ Yes
- ☐ No
8. Do call takers respond to each silent, open line call by querying the line with a TTY?
- ☒ Yes
- ☐ No
9. Can all call takers easily switch back and forth between TTY mode and voice mode during a call?
- ☒ Yes
- ☐ No

ACTIONS:

If you checked "no" for any of the questions above, your office may be violating the requirement for providing equally effective emergency communications services.

- Ensure that telephone emergency services provided for TTY users are equal in response time to services provided to others.
- Ensure that telephone emergency services provided for TTY users are equal in response quality to services provided to others.
- Provide telephone emergency services to TTY users during the same hours of operation as services provided to others.
- Ensure that telephone emergency services provided for TTY users are equal in all other features offered (including automatic number identification, automatic location identification, automatic call distribution, etc.).
- Ensure that call takers respond to each silent, open line call by querying the line with a TTY.
- Ensure that all call takers can easily switch back and forth between TTY mode and voice mode during a call.

Training

10. Is TTY training mandatory for all emergency communications services personnel who may have contact with individuals from the public who have hearing or speech disabilities?

☒

Yes

☐

No

We train with other agencies by calling each other monthly.

11. Do telephone emergency services require or offer refresher training for TTYs at least as often as they require or offer training for voice calls, and at least every six months?

☒

Yes

☐

No

ACTIONS:

If you checked “no” to either of the questions above, your office may be violating the requirement for providing equally effective emergency communications services.

- Make TTY training mandatory for all personnel who may have contact with individuals from the public who have hearing or speech disabilities.
- Ensure that telephone emergency services require or offer refresher training for TTYs at least as often as they require or offer training for voice calls, and at least every six months.

Testing

12. Do you test your telephone emergency services to ensure direct, equal access for people using TTYs?

☒

Yes

☐

No

ACTIONS:

If you checked “no,” your office may be violating the requirement for providing equally effective emergency communications services.

- Conduct unannounced tests to all call-taking positions and all call takers using both silent, open line calls and calls transmitting TTY tones.
- Keep records of the results of all test calls. Include the date and time of each call, identification of the call-taking position, whether the call was silent or transmitted tones, whether the caller received a TTY response and the content of the response, the time elapsed and the number of rings from the initiation of the TTY call until the call taker responded by TTY, and whether the call was processed according to your standard operating procedures.

Title II Checklist (Emergency Management)

General Emergency Management Policies and Procedures

1. If you have a contract or other arrangement with any third party entities, such as the American Red Cross or another local government, to provide emergency planning and/or emergency management or response services, does your contract or other documentation of your arrangement contain policies and procedures to ensure that the third party entities comply with the most stringent CBC and ADA requirements?

- ☒ Yes *County EOC Agreement + pending additional ones as we*
☐ No *move forward with the EOC plan update (grant funded and*
☐ N/A *should be completed by 2nd Quarter 2011).*

2. Do you have written procedures to ensure that you regularly seek and use input from persons with a variety of disabilities and organizations with expertise in disability issues in all phases of your emergency planning, such as those addressing preparation, notification, evacuation, transportation, sheltering, medical and social services, temporary lodging and/or housing, clean-up, and remediation?

- ☒ Yes
☒ No *In progress with grant. Resource list has been created + identified and includes the above line items.*

3. Do you seek input and participation from people with disabilities and organizations with expertise on disability issues when you stage emergency simulations and otherwise test your preparedness?

- ☐ Yes *In progress. Have attended a couple meetings to work on*
☒ No *Incorporation of this group.*

ACTIONS:

If the answer to any of the above questions is "No," this is a red flag that your emergency management program may not be fully accessible to people with disabilities. Here are some steps to ensure that your emergency management programs, policies, and procedures are accessible to people with disabilities.

- If your entity contracts or arranges with third party organizations to help with emergency preparedness or management, formalize in your agreements with those organizations their commitment to compliance with the most stringent requirements of Title II of the ADA and CBC.

- On an ongoing basis, seek and use input from people with different types of disabilities (i.e., mobility, vision, hearing, cognitive, psychiatric, and other disabilities) and organizations with expertise on disability issues regarding all phases of your emergency management plan.
- When you stage simulations or otherwise test the effectiveness of your emergency planning and preparedness, include people with a variety of disabilities in your testing. For example, enlist people with disabilities to role-play during simulation exercises and provide feedback.

Planning for Emergency Notification and Evacuation

This section helps you identify potential ADA-related problems in your plans for the emergency notification and evacuation of people with disabilities. To ensure an accurate assessment of ADA compliance, this checklist should be completed with the input and assistance of those employees and contractors who are involved in your entity's emergency planning, notification, and evacuation programs, services, and activities.

4. For planning purposes, have you determined the extent to which, in an emergency or disaster, people with disabilities who reside or visit your community are likely to need individualized notification, evacuation assistance, and/or transportation, including accessible transportation?

☐ Yes

☒ No *In Progress with EOP Grant Request has been made to the County In Home Support Services resource.*

5. Has your emergency planning identified the resources you will use to meet the needs of individuals with disabilities who require individualized notification, evacuation assistance, and/or transportation, including accessible transportation?

☐ Yes

☒ No *In Progress*

6. If your emergency warning systems use sirens or other audible alerts, do you have written procedures to ensure the use of a combination of methods to provide prompt notification of emergencies to persons who are deaf or hard of hearing? (Note: Examples of methods that may be effective in communicating emergencies to people who are deaf or hard of hearing include auto-dialed TTY and taped telephone messages, text messaging, emails, open captioning on emergency broadcasts on local television stations, and dispatching qualified sign language interpreters to assist with emergency announcements that are televised.)

☐ Yes

☒ No

7. Does your plan address the needs of people with disabilities who will require assistance leaving their homes?

☒ Yes *It will incorporate*

☐ No

8. Do you have written procedures to ensure that your community evacuation plans enable people with a wide variety of disabilities to safely self-evacuate and, for those who cannot self-evacuate, to receive evacuation assistance? (Note: The plans should address the evacuation needs of people who have mobility disabilities, people who are blind or have low vision, people who are deaf or hard of hearing, people with cognitive and psychiatric disabilities, people with disabilities who use service animals, and other people with disabilities who reside or visit your community who may need evacuation assistance.)

☐ Yes

☒ No

9. Have you established a voluntary, confidential registry for persons with disabilities to request individualized notification, evacuation assistance, and transportation?

☐ Yes

☒ No

a. If you maintain such a registry, do you have written procedures to ensure that it is voluntary, it has appropriate confidentiality controls, the information in the registry is regularly updated, and outreach to persons with disabilities and organizations with expertise on disability issues is conducted to inform them of its availability?

☐ Yes

☐ No

☒ N/A

10. Does your emergency transportation plan identify accessible transportation resources that will be available to evacuate persons with mobility disabilities, including people who use wheelchairs or scooters, people who use medical equipment, such as oxygen tanks, and people who use service animals? (Accessible transportation consists of wheelchair lift-equipped vehicles.)

☐ Yes

☒ No *It will be incorporated*

11. Do your emergency plans, policies, and procedures provide for people with disabilities to be evacuated and transported to shelters together with their families?

☐ Yes

☒ No *In progress*

12. Do your emergency management plans, policies, and procedures ensure that people with disabilities are not separated from their service animals during evacuation and transportation?

☐ Yes

☒ No

ACTIONS:

If the answer to any of the above questions is "No," this is a red flag that your emergency management program may not be fully accessible to people with disabilities. Here are some steps to ensure that your emergency notification and evacuation policies, procedures, and programs are accessible to people with disabilities.

- If you use emergency warning systems such as sirens or audible alerts, provide alternate ways to provide prompt notification of emergencies to people who are deaf or hard of hearing. Combine visual and audible alerts to reach a greater audience than either method would reach by itself. Consider using telephone calls with pre-recorded messages, auto-dialed TTY (teletypewriter) messages, text messaging, emails, and direct door-to-door contact with pre-registered individuals. Also use open captioning on emergency broadcasts on local television stations and dispatch qualified sign language interpreters when emergency announcements are televised.
- Adopt policies to ensure that your community evacuation plans enable people with disabilities, including those who have mobility, vision, hearing, cognitive, and psychiatric disabilities, to safely self-evacuate or be evacuated by others.
- Create voluntary, confidential registries of persons with disabilities who may need individualized notification, evacuation assistance, and/or transportation. Establish procedures to ensure that the registries are voluntary, guarantee confidentiality to those who register, and include a process to periodically update the information contained in the registry. Widely publicize the registries, including outreach to people with disabilities, organizations with expertise on disability issues, organizations that provide services to people with disabilities, and paratransit riders. Outreach should explain the purpose of the registries, provide assurances of confidentiality, explain procedures for registering, and include procedures for people who, because of their disabilities, need assistance in registering.

- Identify accessible modes of transportation, such as wheelchair lift-equipped school buses, transit buses, paratransit vans, and taxi cabs that will be available to help evacuate people with disabilities during an emergency. Ensure that your plan addresses the needs of people with disabilities, including those who use wheelchairs, scooters, medical equipment, and service animals as well as those who will need assistance getting from their homes to emergency transportation pickup locations or staging areas.

Training First Responders, Staff, and Volunteers

13. Have the following categories of individuals been trained as first responders?

- a. Emergency planners, those who designate facilities to be used as shelters, and those who make advance arrangements to address emergency staffing, equipment, medical supplies, food and beverages, and other emergency-related needs?

☒ Yes

☐ No

- b. Staff and volunteers who participate in notification activities?

☐ Yes

☒ No *Planned 2nd Quarter*

- c. First responders and other staff and volunteers who deal with evacuation, transportation, and emergency-related security issues?

☐ Yes

☒ No

- d. Shelter staff and volunteers and those who will be involved in routing people to shelters and deciding shelter placements for people with disabilities and their families?

☐ Yes

☒ No

- e. Individuals involved in establishing and operating temporary housing or lodging programs?

☐ Yes

☒ No

f. Individuals who will establish and operate emergency-related medical and social service programs?

☐ Yes

☒ No

g. Individuals who will be responsible for repair, rebuilding, and continuity of program operations following an emergency or disaster?

☐ Yes

☒ No

ACTIONS:

If the answer to any of the above questions is “No,” this is a red flag that your training programs for emergency management personnel and volunteers may not adequately address access issues for people with disabilities. Here are some steps to ensure that your training policies, procedures, and programs ensure access for people with disabilities.

- Ensure that emergency planners, those involved in emergency preparedness, first responders, and those involved in all other aspects of emergency management are trained in the ADA requirements.
- Develop instructions for staff and volunteers who will perform duties related to emergency notification, evacuation, transportation, and the routing of people with disabilities and their families to, and placement of these individuals in, shelters.
- Develop site-specific instructions and training materials for “mass care,” “medical,” and “special needs” shelter volunteers and staff to ensure compliance with CBC and ADA requirements to provide access to programs, services, and activities offered at the shelter, and to address any concerns raised by, people with disabilities. Include in the instructions and training materials, information on shelter accessibility, eligibility criteria, effective communication, reasonable modifications in policies, practices, and procedures for service animals, and other reasonable modifications.
- Train individuals involved in the emergency management process to recognize issues that may affect people with a variety of disabilities and on the procedures to follow when access issues for individuals with disabilities arise during the course of an emergency or disaster, such as contacting your entity’s ADA Incident Manager for guidance.

Physical Accessibility in Emergency Shelter Programs

This section helps you identify architectural barriers to access in your emergency shelter facilities. To ensure an accurate assessment of CBC and ADA compliance, this checklist should be completed with the input and assistance of those employees, volunteers, and representatives of third party organizations that are involved in your emergency planning and sheltering programs.

14. Have you conducted an accessibility survey of all of your emergency shelter facilities, whether owned by government or a private entity to determine if they comply with the most stringent requirements of the CBC and ADA requirements?

☐ Yes

☒ No

15. Have you identified access barriers at any of the shelter facilities?

☐ Yes

☒ No

16. If you found barriers at emergency shelters, have you taken steps to ensure that the barriers are removed to provide (at a minimum) the following accessible features that comply with the most stringent requirements of the CBC and ADA Standards for Accessible Design (ADA Standards): parking, exterior route from the parking to the entrance, entrance, sleeping area, dining area, toilet facilities, bathing facilities, recreational areas, emergency exit, and interior routes to all of these areas?

☐ Yes

☐ No

☒ N/A

17. If all barriers have not been removed from a shelter, have you identified an appropriate number of alternate shelters that provide (at a minimum) the following accessible features that comply with the requirements of the ADA Standards: parking, exterior route from the parking to the entrance, entrance, sleeping area, dining area, toilet facilities, bathing facilities, recreational areas, emergency exit, and interior routes to all of these areas?

☐ Yes

☐ No

☒ N/A

18. Until all emergency shelters have the required accessible features referenced above, have you identified and widely publicized to the public and to persons with disabilities and disability organizations the most accessible emergency shelters and the accessible features that each has?

- ☐ Yes
- ☒ No
- ☐ N/A

19. Have you adopted policies and procedures to ensure that shelter staff and volunteers maintain accessible routes for individuals who use wheelchairs and other mobility aids?

- ☐ Yes
- ☒ No

20. Have you adopted procedures to minimize protruding objects and overhead objects in shelters so that someone who is blind or has low vision can walk safely throughout the shelter?

- ☐ Yes
- ☒ No

21. Have you adopted policies and procedures for shelter staff and volunteers to offer wayfinding assistance to people who are blind and those with low vision who may need assistance in understanding and navigating the shelter layout and locating shelter facilities (e.g., finding the route to the toilet room when furniture layouts change)?

- ☐ Yes
- ☒ No

22. Have you established policies and procedures to ensure that, in the future, facilities are surveyed for accessibility and barriers to access are removed before a facility is designated as a shelter?

- ☐ Yes
- ☒ No

ACTIONS:

If the answer to any of the above questions is "No," this is a red flag that your emergency shelter program may not be fully accessible to people with disabilities. Here are some steps to ensure that your emergency shelters are physically accessible to people with disabilities.

- Survey your community's shelters for barriers to access for persons with disabilities. At a minimum, survey the parking, the path to the entrance, the entrance, sleeping and dining areas,

toilet facilities, bathing facilities, first aid/medical facilities, recreation areas, and the routes to all of these areas.

- If you find barriers to access, remove the barriers or work with the facility's owner to remove the barriers.
- If barriers cannot be removed, find another nearby facility that is – or can be made – accessible.
- Until all emergency shelters have the required accessible features (parking, route to the entrance, entrance, sleeping and dining areas, toilet facilities, bathing facilities, first aid/medical facilities, recreation areas, and the routes to all of these areas), identify and widely publicize the location and features of the most accessible emergency shelters to the public, including specific outreach to persons with disabilities, disability rights organizations, and organizations that provide services to people with disabilities.
- Adopt procedures to ensure that shelter staff and volunteers maintain accessible routes and minimize protruding objects. Beds and other furniture must be placed to ensure that accessible routes are not blocked, and that protruding and overhead objects are minimized in all areas of the shelter.
- Also include procedures for staff and volunteers to offer wayfinding assistance to people who are blind or have low vision to provide orientation to the shelter environment and assistance in locating shelter areas or features.
- Establish policies and procedures to ensure that facilities being considered as possible emergency shelters in the future are surveyed as "Emergency Shelters" and that barriers to access are removed before facilities are designated as emergency shelters.

Policies and Procedures in Emergency Shelters

23. Do you have supplies of informational materials routinely handed out at emergency shelters available in alternative formats (Braille, large print) for people who are blind or have low vision?

☐ Yes

☒ No

24. Have you adopted policies and procedures for shelter staff and volunteers to provide assistance to people who are blind or have low vision by reading and completing forms and other written materials that are not available in alternative formats?

☐ Yes

☒ No

25. Do any of your shelters have low-stimulation “stress-relief zones,” such as an empty classroom in a school building used as an emergency shelter?

☐ Yes

☒ No

- If you offer “stress-relief zones,” have you adopted policies and procedures to make these areas available on a priority basis to people whose disabilities are aggravated by stress?

☐ Yes

☐ No

☒ N/A

26. Have you adopted emergency shelter eligibility policies and procedures to ensure that people with disabilities are housed at “mass care” shelters unless they are medically fragile?

☐ Yes

☒ No

27. Have you adopted “mass care” shelter procedures to ensure that shelter staff and volunteers do not turn away people with disabilities who may need assistance with activities of daily living even though their personal care aides may not be with them?

☐ Yes

☒ No

28. Have you adopted policies and procedures to ensure that “mass care,” “special needs,” and “medical” shelter staff and volunteers are trained and monitored so they provide safe, appropriate assistance with activities of daily living (e.g., eating, dressing, personal hygiene, transferring to and from wheelchairs) that some people with disabilities may require?

☐ Yes

☒ No

29. If you provide a “special needs” or “medical” shelter, have you adopted eligibility policies and procedures to ensure that people with disabilities are not housed in such shelters just because they have a disability? (Note: Special needs and medical shelters are for medically fragile people who require the type of care provided in hospitals and nursing homes. Most people with disabilities are not medically fragile. The CBC and ADA require emergency managers and shelter operators to accommodate people with disabilities in the most integrated setting appropriate to their needs.)

- ☐ Yes
- ☐ No
- ☒ N/A

30. Have your shelter staff and volunteers received training with site-specific instructions for providing people with disabilities access to all services, activities, and programs at “mass care,” “medical,” and “special needs” shelters?

- ☐ Yes
- ☒ No

31. Do you have written policies and procedures to ensure that people who are deaf or hard of hearing, people with speech disabilities, and people who are blind or have low vision are provided with effective communication during their stay at a shelter?

- ☐ Yes
- ☒ No

32. Do you provide a TTY at each emergency shelter for use by people who are deaf, are hard of hearing, or have speech disabilities?

- ☐ Yes
- ☒ No

33. Do you have written procedures to ensure that persons with disabilities who use service animals are not separated from their service animals when using emergency shelters and have full access to shelter programs, services, and activities, even if pets are normally prohibited in shelters or in certain areas of shelters?

- ☐ Yes
- ☒ No

34. Do you have written procedures to ensure that food, water, and a receptacle and plastic bags for the disposal of service animal waste are available at emergency shelters?

- ☐ Yes
- ☒ No

35. Have you established security procedures at shelters that allow people with service animals to take their animals outside for relief without unnecessary delays for security screening upon re-entry?

☐ Yes☒ No

36. Do you have written procedures to ensure that emergency shelters have back-up generators and a way to keep medications refrigerated (such as a refrigerator or a cooler with ice)?

☒ Yes☐ No

37. Do your written procedures on back-up generators include a plan for routinely notifying the public and disability groups of the location of shelters providing electricity and refrigeration?

☐ Yes☒ No

38. Does your emergency management plan provide an effective way for people with disabilities to request and receive durable medical equipment and medication while in shelters?

☐ Yes☒ No

39. Have you established procedures for people with disabilities to request and receive cots or beds, modifications to cots or beds, securement of cots or beds to allow safe transfer to a wheelchair, and placement of cots or beds in specific locations when needed?

☐ Yes☒ No

40. Have you adopted kitchen access policies to provide immediate access to food and refrigerated medications for shelter residents and volunteers whose disabilities may require it?

☐ Yes☒ No

41. Does your emergency management plan ensure that at least some kinds of foods and beverages are available in emergency shelters for people with dietary restrictions, such as people who have diabetes or severe food allergies?

☐ Yes☒ No

ACTIONS:

If the answer to any of the above questions is “No,” this is a red flag that your emergency shelter program may not be fully accessible to people with disabilities. Here are some steps to ensure that the policies and procedures relating to your emergency shelter programs are accessible to people with disabilities.

- Adopt procedures to provide effective communication for people who are deaf or hard of hearing, people with severe speech disabilities, and people who are blind or have low vision. Train staff on the basic procedures for providing effective communication, including exchanging notes or posting written announcements to go with spoken announcements. Provide a TTY in each shelter for persons who are deaf, are hard of hearing, or have speech disabilities. Provide interpreters when necessary to ensure effective communication. Train staff and volunteers to read printed information, upon request, to persons who are blind or who have low vision.
- If space permits, offer low-stimulation “stress-relief zones.” Adopt policies and procedures to make these areas available on a priority basis to people whose disabilities are aggravated by stress.
- Adopt eligibility policies and procedures that ensure that people with disabilities are housed in “mass care” shelters unless they are medically fragile. The procedures should ensure that shelter staff and volunteers accept people with disabilities who need some assistance with activities of daily living even though their personal care aides may not be with them. Also, provide training and monitoring for staff and volunteers on safe, appropriate procedures for providing assistance in daily living activities to people with disabilities who require such assistance.
- If you provide a “special needs” or “medical” shelter, adopt eligibility policies and procedures to ensure that emergency managers do not require people with disabilities to stay in these shelters solely because they have a disability. Special needs and medical shelters are intended to house people who are medically fragile, such as those who require hospital or nursing home care. The ADA requires emergency managers and shelter operators to accommodate people with disabilities in the most integrated setting appropriate to their needs.
- Modify “no pets” policies to allow people with disabilities to stay in shelters – and participate in shelter programs, services, and activities – with their service animals. Also, provide food, water, and waste disposal supplies for service animals.
- Ensure that a reasonable number of shelters have back-up generators and a way to keep medications refrigerated (such as a refrigerator or a cooler with ice). Make these shelters available on a priority basis to people whose disabilities require access to electricity and refrigeration. Until all shelters have back-up generators and refrigeration capacity, routinely notify the public about the location of the shelters that have these features.
- Establish policies and procedures ensuring that people who need electricity for life-sustaining equipment have priority access to it when it is available and that priority access is also provided,

where feasible, for people with disabilities who rely on electrically powered mobility devices.

- Establish policies and procedures, and make advance arrangements for resources to ensure that there is an effective way for people with disabilities to request and receive durable medical equipment and medication.
- Establish policies and procedures and make advance resource arrangements so that people with disabilities can request cots and beds, modifications to cots and beds, securement of cots and beds, and specific placement of cots, beds, or sleeping mats when needed. In shelters where people will generally be expected to use sleeping mats placed on the floor, ensure that some cots and beds are available for people with disabilities who are unable to use sleeping mats. The procedures on cots and beds should provide for staff and volunteers to consult with people with disabilities about their needs and provide necessary accommodations.
- Modify kitchen-access policies so that residents and volunteers whose disabilities may require it can obtain immediate access to food and refrigerated medication. Also, in planning food supplies for shelters, ensure that at least some kinds of foods and beverages are available for people with dietary restrictions, such as diabetes or severe food allergies.

Medical and Social Services

42. Have you established policies and procedures to ensure that medical and social services and other benefit programs are accessible to people with disabilities, including people who use wheelchairs, scooters, and other mobility aids, individuals who cannot leave shelters because of their disabilities, and people who use service animals?

☐ Yes

☒ No

43. Have you established policies and procedures to ensure that application processes for benefit programs are designed so they do not exclude people with disabilities whose disabilities prevent them from using one particular type of application process (e.g., web-based application processes, telephone-based application processes, procedures requiring applicants to have a valid driver's license, or procedures requiring applicants to apply in person)?

☐ Yes

☒ No

44. Do you have policies and procedures to ensure that your medical, social service, and other benefit programs provide effective communication to people with disabilities, including people who are deaf or hard of hearing and people who are blind or have low vision?

☐ Yes

☒ No

- Do your policies and procedures include primary consideration of the communication method preferred by an individual with a disability?

☐ Yes

☒ No

☐ N/A

ACTIONS:

If the answer to any of the above questions is “No,” this is a red flag that the medical and social services your entity provides may not be fully accessible to people with disabilities. Here are some steps to ensure that the policies and procedures relating to your medical and social services are accessible to people with disabilities.

- Establish policies and procedures to ensure that medical, social service, and other benefit programs are accessible to people with disabilities, including people who use wheelchairs, scooters, and other mobility aids and people who use service animals.
- Establish policies and procedures to ensure that medical, social service, and other benefit programs do not have eligibility criteria that screen out or tend to screen out people with disabilities, or application processes or procedures that deny access to people with disabilities.
- Establish policies and procedures to ensure that medical, social service, and other benefit programs provide effective communication to people with disabilities, including primary consideration of the method of communication preferred by an individual with a disability.

Post-Sheltering Policies and Procedures

45. Have you adopted procedures to provide additional time, transportation, and search assistance for people with disabilities in emergency shelters to locate accessible temporary housing and support services in the community following an emergency?

- ☐ Yes
- ☒ No

46. If you have a program to provide temporary housing to persons when they leave emergency shelters but cannot yet return home (e.g., housing in dormitories, rooms at lodging facilities, trailers), have you adopted a plan for providing prompt, equivalent temporary housing to persons with disabilities, including accessible housing for people who use wheelchairs, scooters, and other mobility aids and people who are deaf or hard of hearing?

- ☐ Yes
- ☒ No
- ☐ N/A

47. If you have a temporary housing program, do your information materials on temporary housing include information on accessible housing (such as the specific location of accessible hotel rooms within the community or in nearby communities and transportation resources available in that area)?

- ☐ Yes
- ☐ No
- ☒ N/A

ACTIONS:

If the answer to any of the above questions is "No," this is a red flag that your emergency management and post-shelter programs may not be fully accessible to people with disabilities. Here are some steps to ensure that your post-shelter policies, procedures, and programs are accessible to people with disabilities.

- Modify policies, as necessary, to provide transportation, search assistance, and additional time in shelters to individuals with disabilities who are attempting to locate housing.
- Identify temporary accessible housing (such as accessible hotel rooms within the community or in nearby communities) that could be used if people with disabilities cannot immediately return home after a disaster. Consider establishing temporary housing procedures to ensure that accessible hotel rooms are available on a priority basis to people with disabilities who need them.
- Establish policies and procedures to ensure that temporary housing information distributed to the public or to shelter residents includes information on accessible housing and transportation resources.

Post-Emergency Repair, Rebuilding, and Resumption of Program Operations

48. Have you established policies and procedures to ensure that the repair and rebuilding of government facilities comply with the most stringent accessibility requirements of CBC and Title II of the ADA?

☒ Yes

☐ No

49. Have you established policies to ensure that programs relocated from a damaged facility on a temporary or permanent basis remain accessible to people with disabilities?

☐ Yes

☒ No

ACTIONS:

If the answer to any of the above questions is "No," this is a red flag that your post-emergency policies and procedures may not be fully accessible to people with disabilities. Here are some steps to ensure that your post-emergency policies and procedures ensure access for people with disabilities.

- Establish policies and procedures to ensure that facilities constructed or altered because of emergency- or disaster-related damage comply with the accessibility requirements of Title II of the ADA and CBC Title 24. Facilities constructed after January 26, 1992, and repairs to such facilities, must comply with Title II's new construction requirements. Alterations to facilities constructed before the ADA became effective, must comply with Title II's requirements for alterations to existing facilities. Alterations may not decrease accessibility.
- Establish policies and procedures to ensure that programs relocated from a damaged facility remain accessible to people with disabilities, whether the relocation is permanent or temporary. Ensure that continuity of operations plans address continuity of access to programs, services, and activities for people with disabilities. Ensure that repair and clean-up activities include the maintenance of accessible features.

Title II Checklist (Website Accessibility)

Assessing Current Webpages and Content on Your Website

This section will help you determine if your website has some of the most common accessibility problems. It will not identify all website accessibility problems. You may have to ask the IT department to assist you in answering these questions.

- 1. Does the top of each page with navigation links have a “skip navigation” link? (This feature directs screen readers to bypass the row of navigation links and start at the webpage content, thus enabling people who use screen readers to avoid having to listen to all the links each time they move to a new page.)**

Yes


No
- 2. Do all links have a text description that can be read by a screen reader (not just a graphic or “click here”)?**

Yes

No
- 3. Do all of the photographs, maps, graphics and other images on the website currently have HTML tags (such as an “alt” tag or a long description tag) with text equivalents of the material being visually conveyed?**

Yes

No
- 4. Are all of the documents posted on your website available in HTML or another text-based format (for example, rich text format (RTF) or word processing format), even if you are also providing them in another format, such as Portable Document Format (PDF)?**

Yes 

No
- 5. If your website has online forms, do HTML tags describe all of the controls (including all text fields, check boxes, drop-down lists, and buttons) that people can use in order to complete and submit the forms?**

Yes

No

N/A

- 6. If your website has online forms, does the default setting in drop-down lists describe the information being requested instead of displaying a response option (e.g., “your age” instead of “18 - 21”)?**

Yes

No

N/A

- 7. If a webpage has data charts or tables, is HTML used to associate all data cells with column and row identifiers?**

Yes

No

N/A

- 8. Do all video files on your website have audio descriptions of what is being displayed to provide access to visually conveyed information for people who are blind or have low vision?**

Yes

No

N/A

- 9. Do all video files on your website have written captions of spoken communication synchronized with the action to provide access to people who are deaf or hard of hearing?**

Yes

No

N/A

- 10. Do all audio files on your website have written captions of spoken communication synchronized with the action to provide access to people who are deaf or hard of hearing?**

Yes

No

N/A

11. Have all webpages been designed so they can be viewed using visitors' web browser and operating system settings for color and font?

Yes

No

Website Accessibility Policy and Procedures

This section will help you identify potential problems with the ongoing process of ensuring website accessibility

12. Do you have a written policy on website accessibility?

Yes

No

13. Is the website accessibility policy posted on your website in a place where it can be easily located?

Yes

No

N/A

14. Have procedures been developed to ensure that content is not added to your website until it has been made accessible?

Yes

No

15. Does the website manager check the HTML of all new webpages to confirm accessibility before the pages are posted?

Yes

No



16. When documents are added to your website in PDF format, are text-based versions of the documents (e.g., HTML, RTF, or word processing format) added at the same time as the PDF versions?

Yes

No

N/A

17. Have in-house staff and contractors received information about the website accessibility policy and procedures to ensure website accessibility?

Yes

No

N/A

18. Have in-house and contractor staff received appropriate training on how to ensure the accessibility of your website?

Yes

No

19. Have in-house and contractor staff who create web content or post it on your website received copies of the Department of Justice's technical assistance document "Accessibility of State and Local Government Websites to People with Disabilities"?

Yes

No

20. If your website contains inaccessible content, is a specific written plan including timeframes in place now to make all of your existing web content accessible?

Yes

No

N/A - website is completely accessible

21. Have you posted on your website a plan to improve website accessibility and invited suggestions for improvements?

Yes

No

22. Does your website home page include easily locatable information, including a telephone number and email address, for use in reporting website accessibility problems and requesting accessible services and information?

Yes



No

23. Do you have procedures in place to assure a quick response to website visitors with disabilities who are having difficulty accessing information or services available via the website?

Yes

No

24. Have you asked disability groups representing people with a wide variety of disabilities to provide feedback on the accessibility of your website? (Note: Feedback from people who use a variety of assistive technologies is helpful in ensuring website accessibility.)

Yes

No

25. Have you tested your website using one of the products available on the Internet to test website accessibility? (Note: Products available for testing website accessibility include no-cost and low-cost options. These products may not identify all accessibility issues and may flag issues that are not accessibility problems. However, they are, nonetheless, a helpful tool in improving website accessibility.)

Yes

No

26. Are alternative ways of accessing web-based information, programs, activities, and services available for people with disabilities who cannot use computers?

Yes

No

ACTIONS:

If the answer to any of the above questions is “No,” there may be accessibility problems with your website. Here are some steps to take to ensure that your website – and the programs and services offered on it – are accessible to people with disabilities.

- Establish a policy that your webpages will be accessible and create a process for implementation.
- Check the HTML of all new webpages. Make sure that accessible elements are used, including “alt” tags, long descriptions, and captions, as needed.
- Ensure that your webpages are designed in a manner that allows them to be displayed using a visitor’s own settings for color and fonts.
- If images are used, including photos, graphics, scanned images, or image maps, make sure to include text equivalents for them, using “alt” tags and/or long descriptions for each. Ensure that the text equivalents convey the meaningful information presented visually by the image.
- If you use online forms and tables, make those elements accessible.
- Ensure that videos appearing on your website include appropriately synchronized audio description and captions.
- When posting new documents on the website, always provide them in HTML or another text-based format (even if you are also providing them in another format, such as PDF). If documents are provided in both formats, provide both formats at the same time so people with disabilities have the same degree of access as others.
- Develop a plan for making your existing web content accessible, including specific steps and timeframes. Describe your plan on an accessible webpage that can be easily located from your home page. Encourage input on accessibility improvements, including which pages should be given high priority for change. Let citizens know about the standards or guidelines that are being used to provide accessibility. Make accessibility modifications to the more popular webpages on your website a priority.
- Ensure that in-house staff and contractors responsible for webpages and webpage content development are properly trained on your web accessibility policy and procedures.
- Provide a way for visitors to request accessible information or services and provide feedback about accessibility problems by posting a telephone number and email address on your home page. Establish procedures to assure a quick response to people with disabilities who use this contact information to access web-based information or services.
- Periodically enlist people with a variety of disabilities to test your webpages for accessibility and ease of use; use this information to increase your website accessibility.
- Consider using one of the no-cost or low-cost resources available on the Internet to test the accessibility of your website. (Please note, however, that these products may not identify all accessibility problems on your website.)
- Ensure that alternative means are available for people with disabilities who are unable to use computers to access information, programs, and services that are normally provided on your website.

Title II Checklist (Physical Accessibility in City Facilities)

You may need the assistance of personnel responsible for overseeing City buildings and highway, street, road, and sidewalk maintenance to assist you in completing the checklist.

Evaluating Compliance with the Requirements for Curbs at Pedestrian Crossings

Review the policies, procedures, and contracts your entity has used relating to the construction, alteration, and repair of City facilities, including buildings and facilities within the public rights-of-way. If your entity does not have written policies and procedures, you will need to interview the appropriate employees to find out what policies and procedures your entity has followed.

- 1. Since January 26, 1992, has your entity implemented policies and procedures to ensure that curb ramps or other compliant surfaces were provided wherever walkways intersected curbs whenever your entity constructed or altered highways, streets, roads, pedestrian crossings (including traffic islands), and sidewalks? (For purposes of answering this checklist, alteration generally includes paving, repaving, and resurfacing but does not include normal maintenance, such as filling potholes.)**

Yes

No

- 2. Since January 26, 1992, has your entity implemented policies and procedures to ensure that City facilities (buildings and facilities within the public rights-of-way) were constructed and altered in compliance with the most stringent requirements from the ADA Standards for Accessible Design or the California Building Code Title 24?**

Yes

No

- 3. Review any standardized curb ramp designs and specifications that your entity has used since January 26, 1992. Are the designs ADA and CBC-compliant? (If you do not have experience reviewing design and specification documents, you may find it helpful to obtain assistance from personnel who work in your highway or public works department.)**

Yes

No

- 4. Survey a sample of the City facilities (buildings and facilities within the public rights-of-way) that were constructed by or on behalf of your entity after January 26, 1992. In selecting your samples,**

make sure that you have a representative selection of pedestrian crossings constructed and altered at different time periods between January 26, 1992 and today, as well as facilities constructed and altered by a variety of different contractors and located in different areas of your community.

- a. Do all City buildings have an accessible route that connects at least one accessible building entrance to the accessible parking provided?

Yes

No

- b. Where a developed public rights-of-way exists, is a connection provided between City building entrances and the existing sidewalk, as well as the existing bus or transit stops within the public rights-of-way?

Yes

No

- c. Do all City curbs where sidewalks and walkways intersect with roads, streets, or highways have curb ramps or blended transitions that allow people with disabilities to go from the sidewalk on one side of the vehicular way across any traffic islands with curbs to the sidewalk on the opposite side?

Yes

No

- d. Are all of the City curb ramps and blended transitions free of accessibility problems?

Yes

No

- e. Are all of the City sidewalks free of accessibility problems?

Yes

No

- f. Are all of the City bus or transit stops free of accessibility problems?

Yes

No

- 5. Has your entity performed an evaluation of its pre-ADA pedestrian crossings to identify the locations where curb ramps need to be constructed to provide program access for people with disabilities? (This survey may have occurred when your entity performed a self-evaluation and developed a transition plan.)**

Yes

No

We are in the process of performing this evaluation now

- 6. If the answer to Question #5 is “Yes,” has your entity been implementing those curb ramp installations as it implements its long-range plan for streets and sidewalks?**

Yes

No

N/A

- 7. Does your entity seek input from people with disabilities with respect to its plans for the construction and alteration of highways, streets, roads, sidewalks, and pedestrian crossings?**

Yes

No

N/A

- 8. Does your entity have a mechanism that people with disabilities can use to request the installation or repair of a curb ramp?**

Yes

No

- 9. If your answer to Question #8 is “Yes,” does your entity also have procedures to ensure that such requests are given priority when your entity plans and implements the construction and alteration of streets, roads, highways, sidewalks, and pedestrian crossings?**

Yes

No

N/A

ACTIONS:

If you answered “No” to any of these questions, it is likely that your entity needs to take some steps to comply with the ADA requirements for curb ramps at pedestrian crossings. The steps needed will depend on whether the problems identified relate to new construction, alterations, the accessibility of pre-ADA pedestrian crossings, or the maintenance of accessibility.

- Identify the newly constructed and altered pedestrian crossings that are inaccessible and incorporate them into your entity’s long-range plan for streets and sidewalks.
- Implement written policies and procedures to ensure that alterations to City buildings or new city buildings are provided with an accessible route that connects accessible building entrances to the existing sidewalk and bus or transit stops
- Implement written policies and procedures to ensure that newly constructed and altered pedestrian crossings are accessible from this point forward.
- Implement written policies and procedures to ensure that, whenever streets, roads, and highways are altered or resurfaced, curb ramps are installed at pedestrian crossings.
- Review any standardized designs your entity uses for the construction of curb ramps and change them, if necessary, to comply with ADA/CBC requirements.
- Assess the extent to which your entity has complied with ADA/CBC requirements for providing curb ramps at pedestrian crossings and transportation stops.
- Evaluate the accessibility of your pre-ADA pedestrian crossings and, using the results of that evaluation, develop a long-range plan to improve their accessibility. In formulating your long-range plan, give priority to accessibility modifications in the following order: those serving or in close proximity to senior centers, schools, medical facilities, providers of services to people with disabilities, local government facilities, bus stops and other transportation services, public accommodations, business districts, and residential areas where requests for curb ramps or other accessibility modifications have been made.
- Get input from people with disabilities on your long-range plan for improving the accessibility of pedestrian crossings.
- Make sure that requests by people with disabilities for the installation and repair of curb ramps are incorporated into your long-range action plan for improving the accessibility of pedestrian crossings. Such requests can help you identify locations that pose access problems for people with disabilities.
- Finally, as part of your review of your state or local government’s buildings and programs, don’t forget to look at the pedestrian routes from accessible parking spaces and transportation stops to the accessible entrances to your facilities. Determine where curb ramps need to be installed. Include these curb ramps as a top priority in your long-range action plan to improve the accessibility of pedestrian crossings.

Title II Checklist (Physical Accessibility in City Facilities)

You may need the assistance of personnel responsible for overseeing City buildings and highway, street, road, and sidewalk maintenance to assist you in completing the checklist.

Evaluating Compliance with the Requirements for Curbs at Pedestrian Crossings

Review the policies, procedures, and contracts your entity has used relating to the construction, alteration, and repair of City facilities, including buildings and facilities within the public rights-of-way. If your entity does not have written policies and procedures, you will need to interview the appropriate employees to find out what policies and procedures your entity has followed.

- 1. Since January 26, 1992, has your entity implemented policies and procedures to ensure that curb ramps or other compliant surfaces were provided wherever walkways intersected curbs whenever your entity constructed or altered highways, streets, roads, pedestrian crossings (including traffic islands), and sidewalks? (For purposes of answering this checklist, alteration generally includes paving, repaving, and resurfacing but does not include normal maintenance, such as filling potholes.)**

Yes

No

- 2. Since January 26, 1992, has your entity implemented policies and procedures to ensure that City facilities (buildings and facilities within the public rights-of-way) were constructed and altered in compliance with the most stringent requirements from the ADA Standards for Accessible Design or the California Building Code Title 24?**

Yes

No

- 3. Review any standardized curb ramp designs and specifications that your entity has used since January 26, 1992. Are the designs ADA and CBC-compliant? (If you do not have experience reviewing design and specification documents, you may find it helpful to obtain assistance from personnel who work in your highway or public works department.)**

Yes

No

- 4. Survey a sample of the City facilities (buildings and facilities within the public rights-of-way) that were constructed by or on behalf of your entity after January 26, 1992. In selecting your samples,**

make sure that you have a representative selection of pedestrian crossings constructed and altered at different time periods between January 26, 1992 and today, as well as facilities constructed and altered by a variety of different contractors and located in different areas of your community.

- a. Do all City buildings have an accessible route that connects at least one accessible building entrance to the accessible parking provided?

Yes

No

- b. Where a developed public rights-of-way exists, is a connection provided between City building entrances and the existing sidewalk, as well as the existing bus or transit stops within the public rights-of-way?

Yes

No

- c. Do all City curbs where sidewalks and walkways intersect with roads, streets, or highways have curb ramps or blended transitions that allow people with disabilities to go from the sidewalk on one side of the vehicular way across any traffic islands with curbs to the sidewalk on the opposite side?

Yes

No

- d. Are all of the City curb ramps and blended transitions free of accessibility problems?

Yes

No

- e. Are all of the City sidewalks free of accessibility problems?

Yes

No

- f. Are all of the City bus or transit stops free of accessibility problems?

Yes

No

- 5. Has your entity performed an evaluation of its pre-ADA pedestrian crossings to identify the locations where curb ramps need to be constructed to provide program access for people with disabilities? (This survey may have occurred when your entity performed a self-evaluation and developed a transition plan.)**

Yes

No

We are in the process of performing this evaluation now

- 6. If the answer to Question #5 is “Yes,” has your entity been implementing those curb ramp installations as it implements its long-range plan for streets and sidewalks?**

Yes

No

N/A

- 7. Does your entity seek input from people with disabilities with respect to its plans for the construction and alteration of highways, streets, roads, sidewalks, and pedestrian crossings?**

Yes

No

N/A

- 8. Does your entity have a mechanism that people with disabilities can use to request the installation or repair of a curb ramp?**

Yes

No

- 9. If your answer to Question #8 is “Yes,” does your entity also have procedures to ensure that such requests are given priority when your entity plans and implements the construction and alteration of streets, roads, highways, sidewalks, and pedestrian crossings?**

Yes

No

N/A

ACTIONS:

If you answered “No” to any of these questions, it is likely that your entity needs to take some steps to comply with the ADA requirements for curb ramps at pedestrian crossings. The steps needed will depend on whether the problems identified relate to new construction, alterations, the accessibility of pre-ADA pedestrian crossings, or the maintenance of accessibility.

- Identify the newly constructed and altered pedestrian crossings that are inaccessible and incorporate them into your entity’s long-range plan for streets and sidewalks.
- Implement written policies and procedures to ensure that alterations to City buildings or new city buildings are provided with an accessible route that connects accessible building entrances to the existing sidewalk and bus or transit stops
- Implement written policies and procedures to ensure that newly constructed and altered pedestrian crossings are accessible from this point forward.
- Implement written policies and procedures to ensure that, whenever streets, roads, and highways are altered or resurfaced, curb ramps are installed at pedestrian crossings.
- Review any standardized designs your entity uses for the construction of curb ramps and change them, if necessary, to comply with ADA/CBC requirements.
- Assess the extent to which your entity has complied with ADA/CBC requirements for providing curb ramps at pedestrian crossings and transportation stops.
- Evaluate the accessibility of your pre-ADA pedestrian crossings and, using the results of that evaluation, develop a long-range plan to improve their accessibility. In formulating your long-range plan, give priority to accessibility modifications in the following order: those serving or in close proximity to senior centers, schools, medical facilities, providers of services to people with disabilities, local government facilities, bus stops and other transportation services, public accommodations, business districts, and residential areas where requests for curb ramps or other accessibility modifications have been made.
- Get input from people with disabilities on your long-range plan for improving the accessibility of pedestrian crossings.
- Make sure that requests by people with disabilities for the installation and repair of curb ramps are incorporated into your long-range action plan for improving the accessibility of pedestrian crossings. Such requests can help you identify locations that pose access problems for people with disabilities.
- Finally, as part of your review of your state or local government’s buildings and programs, don’t forget to look at the pedestrian routes from accessible parking spaces and transportation stops to the accessible entrances to your facilities. Determine where curb ramps need to be installed. Include these curb ramps as a top priority in your long-range action plan to improve the accessibility of pedestrian crossings.

Title II Checklist (Physical Accessibility in City Facilities)

You may need the assistance of personnel responsible for overseeing City buildings and highway, street, road, and sidewalk maintenance to assist you in completing the checklist.

Evaluating Compliance with the Requirements for Curbs at Pedestrian Crossings

Review the policies, procedures, and contracts your entity has used relating to the construction, alteration, and repair of City facilities, including buildings and facilities within the public rights-of-way. If your entity does not have written policies and procedures, you will need to interview the appropriate employees to find out what policies and procedures your entity has followed.

- 1. Since January 26, 1992, has your entity implemented policies and procedures to ensure that curb ramps or other compliant surfaces were provided wherever walkways intersected curbs whenever your entity constructed or altered highways, streets, roads, pedestrian crossings (including traffic islands), and sidewalks? (For purposes of answering this checklist, alteration generally includes paving, repaving, and resurfacing but does not include normal maintenance, such as filling potholes.)**

Yes

No

- 2. Since January 26, 1992, has your entity implemented policies and procedures to ensure that City facilities (buildings and facilities within the public rights-of-way) were constructed and altered in compliance with the most stringent requirements from the ADA Standards for Accessible Design or the California Building Code Title 24?**

Yes

No

- 3. Review any standardized curb ramp designs and specifications that your entity has used since January 26, 1992. Are the designs ADA and CBC-compliant? (If you do not have experience reviewing design and specification documents, you may find it helpful to obtain assistance from personnel who work in your highway or public works department.)**

Yes

No

- 4. Survey a sample of the City facilities (buildings and facilities within the public rights-of-way) that were constructed by or on behalf of your entity after January 26, 1992. In selecting your samples,**

make sure that you have a representative selection of pedestrian crossings constructed and altered at different time periods between January 26, 1992 and today, as well as facilities constructed and altered by a variety of different contractors and located in different areas of your community.

- a. Do all City buildings have an accessible route that connects at least one accessible building entrance to the accessible parking provided?

Yes

No

- b. Where a developed public rights-of-way exists, is a connection provided between City building entrances and the existing sidewalk, as well as the existing bus or transit stops within the public rights-of-way?

Yes

No

- c. Do all City curbs where sidewalks and walkways intersect with roads, streets, or highways have curb ramps or blended transitions that allow people with disabilities to go from the sidewalk on one side of the vehicular way across any traffic islands with curbs to the sidewalk on the opposite side?

Yes

No

- d. Are all of the City curb ramps and blended transitions free of accessibility problems?

Yes

No

- e. Are all of the City sidewalks free of accessibility problems?

Yes

No

- f. Are all of the City bus or transit stops free of accessibility problems?

Yes

No

- 5. Has your entity performed an evaluation of its pre-ADA pedestrian crossings to identify the locations where curb ramps need to be constructed to provide program access for people with disabilities? (This survey may have occurred when your entity performed a self-evaluation and developed a transition plan.)**

Yes

No

We are in the process of performing this evaluation now

- 6. If the answer to Question #5 is “Yes,” has your entity been implementing those curb ramp installations as it implements its long-range plan for streets and sidewalks?**

Yes

No

N/A

- 7. Does your entity seek input from people with disabilities with respect to its plans for the construction and alteration of highways, streets, roads, sidewalks, and pedestrian crossings?**

Yes

No

N/A

- 8. Does your entity have a mechanism that people with disabilities can use to request the installation or repair of a curb ramp?**

Yes

No

- 9. If your answer to Question #8 is “Yes,” does your entity also have procedures to ensure that such requests are given priority when your entity plans and implements the construction and alteration of streets, roads, highways, sidewalks, and pedestrian crossings?**

Yes

No

N/A

ACTIONS:

If you answered “No” to any of these questions, it is likely that your entity needs to take some steps to comply with the ADA requirements for curb ramps at pedestrian crossings. The steps needed will depend on whether the problems identified relate to new construction, alterations, the accessibility of pre-ADA pedestrian crossings, or the maintenance of accessibility.

- Identify the newly constructed and altered pedestrian crossings that are inaccessible and incorporate them into your entity’s long-range plan for streets and sidewalks.
- Implement written policies and procedures to ensure that alterations to City buildings or new city buildings are provided with an accessible route that connects accessible building entrances to the existing sidewalk and bus or transit stops
- Implement written policies and procedures to ensure that newly constructed and altered pedestrian crossings are accessible from this point forward.
- Implement written policies and procedures to ensure that, whenever streets, roads, and highways are altered or resurfaced, curb ramps are installed at pedestrian crossings.
- Review any standardized designs your entity uses for the construction of curb ramps and change them, if necessary, to comply with ADA/CBC requirements.
- Assess the extent to which your entity has complied with ADA/CBC requirements for providing curb ramps at pedestrian crossings and transportation stops.
- Evaluate the accessibility of your pre-ADA pedestrian crossings and, using the results of that evaluation, develop a long-range plan to improve their accessibility. In formulating your long-range plan, give priority to accessibility modifications in the following order: those serving or in close proximity to senior centers, schools, medical facilities, providers of services to people with disabilities, local government facilities, bus stops and other transportation services, public accommodations, business districts, and residential areas where requests for curb ramps or other accessibility modifications have been made.
- Get input from people with disabilities on your long-range plan for improving the accessibility of pedestrian crossings.
- Make sure that requests by people with disabilities for the installation and repair of curb ramps are incorporated into your long-range action plan for improving the accessibility of pedestrian crossings. Such requests can help you identify locations that pose access problems for people with disabilities.
- Finally, as part of your review of your state or local government’s buildings and programs, don’t forget to look at the pedestrian routes from accessible parking spaces and transportation stops to the accessible entrances to your facilities. Determine where curb ramps need to be installed. Include these curb ramps as a top priority in your long-range action plan to improve the accessibility of pedestrian crossings.

Title II Checklist (Emergency Management)

General Emergency Management Policies and Procedures

1. If you have a contract or other arrangement with any third party entities, such as the American Red Cross or another local government, to provide emergency planning and/or emergency management or response services, does your contract or other documentation of your arrangement contain policies and procedures to ensure that the third party entities comply with the most stringent CBC and ADA requirements?

- ☒ Yes *County EOC Agreement + pending additional ones as we*
☐ No *move forward with the EOC plan update (grant funded and*
☐ N/A *should be completed by 2nd Quarter 2011).*

2. Do you have written procedures to ensure that you regularly seek and use input from persons with a variety of disabilities and organizations with expertise in disability issues in all phases of your emergency planning, such as those addressing preparation, notification, evacuation, transportation, sheltering, medical and social services, temporary lodging and/or housing, clean-up, and remediation?

- ☒ Yes
☒ No *In progress with grant. Resource list has been created + identified and includes the above line items.*

3. Do you seek input and participation from people with disabilities and organizations with expertise on disability issues when you stage emergency simulations and otherwise test your preparedness?

- ☐ Yes *In progress. Have attended a couple meetings to work on*
☒ No *Incorporation of this group.*

ACTIONS:

If the answer to any of the above questions is "No," this is a red flag that your emergency management program may not be fully accessible to people with disabilities. Here are some steps to ensure that your emergency management programs, policies, and procedures are accessible to people with disabilities.

- If your entity contracts or arranges with third party organizations to help with emergency preparedness or management, formalize in your agreements with those organizations their commitment to compliance with the most stringent requirements of Title II of the ADA and CBC.

- On an ongoing basis, seek and use input from people with different types of disabilities (i.e., mobility, vision, hearing, cognitive, psychiatric, and other disabilities) and organizations with expertise on disability issues regarding all phases of your emergency management plan.
- When you stage simulations or otherwise test the effectiveness of your emergency planning and preparedness, include people with a variety of disabilities in your testing. For example, enlist people with disabilities to role-play during simulation exercises and provide feedback.

Planning for Emergency Notification and Evacuation

This section helps you identify potential ADA-related problems in your plans for the emergency notification and evacuation of people with disabilities. To ensure an accurate assessment of ADA compliance, this checklist should be completed with the input and assistance of those employees and contractors who are involved in your entity's emergency planning, notification, and evacuation programs, services, and activities.

4. For planning purposes, have you determined the extent to which, in an emergency or disaster, people with disabilities who reside or visit your community are likely to need individualized notification, evacuation assistance, and/or transportation, including accessible transportation?

☐ Yes

☒ No

In Progress with EOP Grant Request has been made to the County In Home Support Services resource.

5. Has your emergency planning identified the resources you will use to meet the needs of individuals with disabilities who require individualized notification, evacuation assistance, and/or transportation, including accessible transportation?

☐ Yes

☒ No

In Progress

6. If your emergency warning systems use sirens or other audible alerts, do you have written procedures to ensure the use of a combination of methods to provide prompt notification of emergencies to persons who are deaf or hard of hearing? (Note: Examples of methods that may be effective in communicating emergencies to people who are deaf or hard of hearing include auto-dialed TTY and taped telephone messages, text messaging, emails, open captioning on emergency broadcasts on local television stations, and dispatching qualified sign language interpreters to assist with emergency announcements that are televised.)

☐ Yes

☒ No

7. Does your plan address the needs of people with disabilities who will require assistance leaving their homes?

☒ Yes *It will incorporate*

☐ No

8. Do you have written procedures to ensure that your community evacuation plans enable people with a wide variety of disabilities to safely self-evacuate and, for those who cannot self-evacuate, to receive evacuation assistance? (Note: The plans should address the evacuation needs of people who have mobility disabilities, people who are blind or have low vision, people who are deaf or hard of hearing, people with cognitive and psychiatric disabilities, people with disabilities who use service animals, and other people with disabilities who reside or visit your community who may need evacuation assistance.)

☐ Yes

☒ No

9. Have you established a voluntary, confidential registry for persons with disabilities to request individualized notification, evacuation assistance, and transportation?

☐ Yes

☒ No

a. If you maintain such a registry, do you have written procedures to ensure that it is voluntary, it has appropriate confidentiality controls, the information in the registry is regularly updated, and outreach to persons with disabilities and organizations with expertise on disability issues is conducted to inform them of its availability?

☐ Yes

☐ No

☒ N/A

10. Does your emergency transportation plan identify accessible transportation resources that will be available to evacuate persons with mobility disabilities, including people who use wheelchairs or scooters, people who use medical equipment, such as oxygen tanks, and people who use service animals? (Accessible transportation consists of wheelchair lift-equipped vehicles.)

☐ Yes

☒ No *It will be incorporated*

11. Do your emergency plans, policies, and procedures provide for people with disabilities to be evacuated and transported to shelters together with their families?

☐ Yes

☒ No *In progress*

12. Do your emergency management plans, policies, and procedures ensure that people with disabilities are not separated from their service animals during evacuation and transportation?

☐ Yes

☒ No

ACTIONS:

If the answer to any of the above questions is "No," this is a red flag that your emergency management program may not be fully accessible to people with disabilities. Here are some steps to ensure that your emergency notification and evacuation policies, procedures, and programs are accessible to people with disabilities.

- If you use emergency warning systems such as sirens or audible alerts, provide alternate ways to provide prompt notification of emergencies to people who are deaf or hard of hearing. Combine visual and audible alerts to reach a greater audience than either method would reach by itself. Consider using telephone calls with pre-recorded messages, auto-dialed TTY (teletypewriter) messages, text messaging, emails, and direct door-to-door contact with pre-registered individuals. Also use open captioning on emergency broadcasts on local television stations and dispatch qualified sign language interpreters when emergency announcements are televised.
- Adopt policies to ensure that your community evacuation plans enable people with disabilities, including those who have mobility, vision, hearing, cognitive, and psychiatric disabilities, to safely self-evacuate or be evacuated by others.
- Create voluntary, confidential registries of persons with disabilities who may need individualized notification, evacuation assistance, and/or transportation. Establish procedures to ensure that the registries are voluntary, guarantee confidentiality to those who register, and include a process to periodically update the information contained in the registry. Widely publicize the registries, including outreach to people with disabilities, organizations with expertise on disability issues, organizations that provide services to people with disabilities, and paratransit riders. Outreach should explain the purpose of the registries, provide assurances of confidentiality, explain procedures for registering, and include procedures for people who, because of their disabilities, need assistance in registering.

- Identify accessible modes of transportation, such as wheelchair lift-equipped school buses, transit buses, paratransit vans, and taxi cabs that will be available to help evacuate people with disabilities during an emergency. Ensure that your plan addresses the needs of people with disabilities, including those who use wheelchairs, scooters, medical equipment, and service animals as well as those who will need assistance getting from their homes to emergency transportation pickup locations or staging areas.

Training First Responders, Staff, and Volunteers

13. Have the following categories of individuals been trained as first responders?

- a. Emergency planners, those who designate facilities to be used as shelters, and those who make advance arrangements to address emergency staffing, equipment, medical supplies, food and beverages, and other emergency-related needs?

☒ Yes

☐ No

- b. Staff and volunteers who participate in notification activities?

☐ Yes

☒ No *Planned 2nd Quarter*

- c. First responders and other staff and volunteers who deal with evacuation, transportation, and emergency-related security issues?

☐ Yes

☒ No

- d. Shelter staff and volunteers and those who will be involved in routing people to shelters and deciding shelter placements for people with disabilities and their families?

☐ Yes

☒ No

- e. Individuals involved in establishing and operating temporary housing or lodging programs?

☐ Yes

☒ No

f. Individuals who will establish and operate emergency-related medical and social service programs?

☐ Yes

☒ No

g. Individuals who will be responsible for repair, rebuilding, and continuity of program operations following an emergency or disaster?

☐ Yes

☒ No

ACTIONS:

If the answer to any of the above questions is “No,” this is a red flag that your training programs for emergency management personnel and volunteers may not adequately address access issues for people with disabilities. Here are some steps to ensure that your training policies, procedures, and programs ensure access for people with disabilities.

- Ensure that emergency planners, those involved in emergency preparedness, first responders, and those involved in all other aspects of emergency management are trained in the ADA requirements.
- Develop instructions for staff and volunteers who will perform duties related to emergency notification, evacuation, transportation, and the routing of people with disabilities and their families to, and placement of these individuals in, shelters.
- Develop site-specific instructions and training materials for “mass care,” “medical,” and “special needs” shelter volunteers and staff to ensure compliance with CBC and ADA requirements to provide access to programs, services, and activities offered at the shelter, and to address any concerns raised by, people with disabilities. Include in the instructions and training materials, information on shelter accessibility, eligibility criteria, effective communication, reasonable modifications in policies, practices, and procedures for service animals, and other reasonable modifications.
- Train individuals involved in the emergency management process to recognize issues that may affect people with a variety of disabilities and on the procedures to follow when access issues for individuals with disabilities arise during the course of an emergency or disaster, such as contacting your entity’s ADA Incident Manager for guidance.

Physical Accessibility in Emergency Shelter Programs

This section helps you identify architectural barriers to access in your emergency shelter facilities. To ensure an accurate assessment of CBC and ADA compliance, this checklist should be completed with the input and assistance of those employees, volunteers, and representatives of third party organizations that are involved in your emergency planning and sheltering programs.

14. Have you conducted an accessibility survey of all of your emergency shelter facilities, whether owned by government or a private entity to determine if they comply with the most stringent requirements of the CBC and ADA requirements?

☐ Yes

☒ No

15. Have you identified access barriers at any of the shelter facilities?

☐ Yes

☒ No

16. If you found barriers at emergency shelters, have you taken steps to ensure that the barriers are removed to provide (at a minimum) the following accessible features that comply with the most stringent requirements of the CBC and ADA Standards for Accessible Design (ADA Standards): parking, exterior route from the parking to the entrance, entrance, sleeping area, dining area, toilet facilities, bathing facilities, recreational areas, emergency exit, and interior routes to all of these areas?

☐ Yes

☐ No

☒ N/A

17. If all barriers have not been removed from a shelter, have you identified an appropriate number of alternate shelters that provide (at a minimum) the following accessible features that comply with the requirements of the ADA Standards: parking, exterior route from the parking to the entrance, entrance, sleeping area, dining area, toilet facilities, bathing facilities, recreational areas, emergency exit, and interior routes to all of these areas?

☐ Yes

☐ No

☒ N/A

18. Until all emergency shelters have the required accessible features referenced above, have you identified and widely publicized to the public and to persons with disabilities and disability organizations the most accessible emergency shelters and the accessible features that each has?

- ☐ Yes
- ☒ No
- ☐ N/A

19. Have you adopted policies and procedures to ensure that shelter staff and volunteers maintain accessible routes for individuals who use wheelchairs and other mobility aids?

- ☐ Yes
- ☒ No

20. Have you adopted procedures to minimize protruding objects and overhead objects in shelters so that someone who is blind or has low vision can walk safely throughout the shelter?

- ☐ Yes
- ☒ No

21. Have you adopted policies and procedures for shelter staff and volunteers to offer wayfinding assistance to people who are blind and those with low vision who may need assistance in understanding and navigating the shelter layout and locating shelter facilities (e.g., finding the route to the toilet room when furniture layouts change)?

- ☐ Yes
- ☒ No

22. Have you established policies and procedures to ensure that, in the future, facilities are surveyed for accessibility and barriers to access are removed before a facility is designated as a shelter?

- ☐ Yes
- ☒ No

ACTIONS:

If the answer to any of the above questions is "No," this is a red flag that your emergency shelter program may not be fully accessible to people with disabilities. Here are some steps to ensure that your emergency shelters are physically accessible to people with disabilities.

- Survey your community's shelters for barriers to access for persons with disabilities. At a minimum, survey the parking, the path to the entrance, the entrance, sleeping and dining areas,

toilet facilities, bathing facilities, first aid/medical facilities, recreation areas, and the routes to all of these areas.

- If you find barriers to access, remove the barriers or work with the facility's owner to remove the barriers.
- If barriers cannot be removed, find another nearby facility that is – or can be made – accessible.
- Until all emergency shelters have the required accessible features (parking, route to the entrance, entrance, sleeping and dining areas, toilet facilities, bathing facilities, first aid/medical facilities, recreation areas, and the routes to all of these areas), identify and widely publicize the location and features of the most accessible emergency shelters to the public, including specific outreach to persons with disabilities, disability rights organizations, and organizations that provide services to people with disabilities.
- Adopt procedures to ensure that shelter staff and volunteers maintain accessible routes and minimize protruding objects. Beds and other furniture must be placed to ensure that accessible routes are not blocked, and that protruding and overhead objects are minimized in all areas of the shelter.
- Also include procedures for staff and volunteers to offer wayfinding assistance to people who are blind or have low vision to provide orientation to the shelter environment and assistance in locating shelter areas or features.
- Establish policies and procedures to ensure that facilities being considered as possible emergency shelters in the future are surveyed as "Emergency Shelters" and that barriers to access are removed before facilities are designated as emergency shelters.

Policies and Procedures in Emergency Shelters

23. Do you have supplies of informational materials routinely handed out at emergency shelters available in alternative formats (Braille, large print) for people who are blind or have low vision?

☐ Yes

☒ No

24. Have you adopted policies and procedures for shelter staff and volunteers to provide assistance to people who are blind or have low vision by reading and completing forms and other written materials that are not available in alternative formats?

☐ Yes

☒ No

25. Do any of your shelters have low-stimulation “stress-relief zones,” such as an empty classroom in a school building used as an emergency shelter?

☐ Yes

☒ No

- If you offer “stress-relief zones,” have you adopted policies and procedures to make these areas available on a priority basis to people whose disabilities are aggravated by stress?

☐ Yes

☐ No

☒ N/A

26. Have you adopted emergency shelter eligibility policies and procedures to ensure that people with disabilities are housed at “mass care” shelters unless they are medically fragile?

☐ Yes

☒ No

27. Have you adopted “mass care” shelter procedures to ensure that shelter staff and volunteers do not turn away people with disabilities who may need assistance with activities of daily living even though their personal care aides may not be with them?

☐ Yes

☒ No

28. Have you adopted policies and procedures to ensure that “mass care,” “special needs,” and “medical” shelter staff and volunteers are trained and monitored so they provide safe, appropriate assistance with activities of daily living (e.g., eating, dressing, personal hygiene, transferring to and from wheelchairs) that some people with disabilities may require?

☐ Yes

☒ No

29. If you provide a “special needs” or “medical” shelter, have you adopted eligibility policies and procedures to ensure that people with disabilities are not housed in such shelters just because they have a disability? (Note: Special needs and medical shelters are for medically fragile people who require the type of care provided in hospitals and nursing homes. Most people with disabilities are not medically fragile. The CBC and ADA require emergency managers and shelter operators to accommodate people with disabilities in the most integrated setting appropriate to their needs.)

- ☐ Yes
- ☐ No
- ☒ N/A

30. Have your shelter staff and volunteers received training with site-specific instructions for providing people with disabilities access to all services, activities, and programs at “mass care,” “medical,” and “special needs” shelters?

- ☐ Yes
- ☒ No

31. Do you have written policies and procedures to ensure that people who are deaf or hard of hearing, people with speech disabilities, and people who are blind or have low vision are provided with effective communication during their stay at a shelter?

- ☐ Yes
- ☒ No

32. Do you provide a TTY at each emergency shelter for use by people who are deaf, are hard of hearing, or have speech disabilities?

- ☐ Yes
- ☒ No

33. Do you have written procedures to ensure that persons with disabilities who use service animals are not separated from their service animals when using emergency shelters and have full access to shelter programs, services, and activities, even if pets are normally prohibited in shelters or in certain areas of shelters?

- ☐ Yes
- ☒ No

34. Do you have written procedures to ensure that food, water, and a receptacle and plastic bags for the disposal of service animal waste are available at emergency shelters?

- ☐ Yes
- ☒ No

35. Have you established security procedures at shelters that allow people with service animals to take their animals outside for relief without unnecessary delays for security screening upon re-entry?

☐ Yes

☒ No

36. Do you have written procedures to ensure that emergency shelters have back-up generators and a way to keep medications refrigerated (such as a refrigerator or a cooler with ice)?

☒ Yes

☐ No

37. Do your written procedures on back-up generators include a plan for routinely notifying the public and disability groups of the location of shelters providing electricity and refrigeration?

☐ Yes

☒ No

38. Does your emergency management plan provide an effective way for people with disabilities to request and receive durable medical equipment and medication while in shelters?

☐ Yes

☒ No

39. Have you established procedures for people with disabilities to request and receive cots or beds, modifications to cots or beds, securement of cots or beds to allow safe transfer to a wheelchair, and placement of cots or beds in specific locations when needed?

☐ Yes

☒ No

40. Have you adopted kitchen access policies to provide immediate access to food and refrigerated medications for shelter residents and volunteers whose disabilities may require it?

☐ Yes

☒ No

41. Does your emergency management plan ensure that at least some kinds of foods and beverages are available in emergency shelters for people with dietary restrictions, such as people who have diabetes or severe food allergies?

☐ Yes

☒ No

ACTIONS:

If the answer to any of the above questions is “No,” this is a red flag that your emergency shelter program may not be fully accessible to people with disabilities. Here are some steps to ensure that the policies and procedures relating to your emergency shelter programs are accessible to people with disabilities.

- Adopt procedures to provide effective communication for people who are deaf or hard of hearing, people with severe speech disabilities, and people who are blind or have low vision. Train staff on the basic procedures for providing effective communication, including exchanging notes or posting written announcements to go with spoken announcements. Provide a TTY in each shelter for persons who are deaf, are hard of hearing, or have speech disabilities. Provide interpreters when necessary to ensure effective communication. Train staff and volunteers to read printed information, upon request, to persons who are blind or who have low vision.
- If space permits, offer low-stimulation “stress-relief zones.” Adopt policies and procedures to make these areas available on a priority basis to people whose disabilities are aggravated by stress.
- Adopt eligibility policies and procedures that ensure that people with disabilities are housed in “mass care” shelters unless they are medically fragile. The procedures should ensure that shelter staff and volunteers accept people with disabilities who need some assistance with activities of daily living even though their personal care aides may not be with them. Also, provide training and monitoring for staff and volunteers on safe, appropriate procedures for providing assistance in daily living activities to people with disabilities who require such assistance.
- If you provide a “special needs” or “medical” shelter, adopt eligibility policies and procedures to ensure that emergency managers do not require people with disabilities to stay in these shelters solely because they have a disability. Special needs and medical shelters are intended to house people who are medically fragile, such as those who require hospital or nursing home care. The ADA requires emergency managers and shelter operators to accommodate people with disabilities in the most integrated setting appropriate to their needs.
- Modify “no pets” policies to allow people with disabilities to stay in shelters – and participate in shelter programs, services, and activities – with their service animals. Also, provide food, water, and waste disposal supplies for service animals.
- Ensure that a reasonable number of shelters have back-up generators and a way to keep medications refrigerated (such as a refrigerator or a cooler with ice). Make these shelters available on a priority basis to people whose disabilities require access to electricity and refrigeration. Until all shelters have back-up generators and refrigeration capacity, routinely notify the public about the location of the shelters that have these features.
- Establish policies and procedures ensuring that people who need electricity for life-sustaining equipment have priority access to it when it is available and that priority access is also provided,

where feasible, for people with disabilities who rely on electrically powered mobility devices.

- Establish policies and procedures, and make advance arrangements for resources to ensure that there is an effective way for people with disabilities to request and receive durable medical equipment and medication.
- Establish policies and procedures and make advance resource arrangements so that people with disabilities can request cots and beds, modifications to cots and beds, securement of cots and beds, and specific placement of cots, beds, or sleeping mats when needed. In shelters where people will generally be expected to use sleeping mats placed on the floor, ensure that some cots and beds are available for people with disabilities who are unable to use sleeping mats. The procedures on cots and beds should provide for staff and volunteers to consult with people with disabilities about their needs and provide necessary accommodations.
- Modify kitchen-access policies so that residents and volunteers whose disabilities may require it can obtain immediate access to food and refrigerated medication. Also, in planning food supplies for shelters, ensure that at least some kinds of foods and beverages are available for people with dietary restrictions, such as diabetes or severe food allergies.

Medical and Social Services

42. Have you established policies and procedures to ensure that medical and social services and other benefit programs are accessible to people with disabilities, including people who use wheelchairs, scooters, and other mobility aids, individuals who cannot leave shelters because of their disabilities, and people who use service animals?

☐ Yes

☒ No

43. Have you established policies and procedures to ensure that application processes for benefit programs are designed so they do not exclude people with disabilities whose disabilities prevent them from using one particular type of application process (e.g., web-based application processes, telephone-based application processes, procedures requiring applicants to have a valid driver's license, or procedures requiring applicants to apply in person)?

☐ Yes

☒ No

44. Do you have policies and procedures to ensure that your medical, social service, and other benefit programs provide effective communication to people with disabilities, including people who are deaf or hard of hearing and people who are blind or have low vision?

☐ Yes☒ No

- **Do your policies and procedures include primary consideration of the communication method preferred by an individual with a disability?**

☐ Yes☒ No☐ N/A**ACTIONS:**

If the answer to any of the above questions is “No,” this is a red flag that the medical and social services your entity provides may not be fully accessible to people with disabilities. Here are some steps to ensure that the policies and procedures relating to your medical and social services are accessible to people with disabilities.

- Establish policies and procedures to ensure that medical, social service, and other benefit programs are accessible to people with disabilities, including people who use wheelchairs, scooters, and other mobility aids and people who use service animals.
- Establish policies and procedures to ensure that medical, social service, and other benefit programs do not have eligibility criteria that screen out or tend to screen out people with disabilities, or application processes or procedures that deny access to people with disabilities.
- Establish policies and procedures to ensure that medical, social service, and other benefit programs provide effective communication to people with disabilities, including primary consideration of the method of communication preferred by an individual with a disability.

Post-Sheltering Policies and Procedures

- 45. Have you adopted procedures to provide additional time, transportation, and search assistance for people with disabilities in emergency shelters to locate accessible temporary housing and support services in the community following an emergency?**

- ☐ Yes
- ☒ No

46. If you have a program to provide temporary housing to persons when they leave emergency shelters but cannot yet return home (e.g., housing in dormitories, rooms at lodging facilities, trailers), have you adopted a plan for providing prompt, equivalent temporary housing to persons with disabilities, including accessible housing for people who use wheelchairs, scooters, and other mobility aids and people who are deaf or hard of hearing?

- ☐ Yes
- ☒ No
- ☐ N/A

47. If you have a temporary housing program, do your information materials on temporary housing include information on accessible housing (such as the specific location of accessible hotel rooms within the community or in nearby communities and transportation resources available in that area)?

- ☐ Yes
- ☐ No
- ☒ N/A

ACTIONS:

If the answer to any of the above questions is "No," this is a red flag that your emergency management and post-shelter programs may not be fully accessible to people with disabilities. Here are some steps to ensure that your post-shelter policies, procedures, and programs are accessible to people with disabilities.

- Modify policies, as necessary, to provide transportation, search assistance, and additional time in shelters to individuals with disabilities who are attempting to locate housing.
- Identify temporary accessible housing (such as accessible hotel rooms within the community or in nearby communities) that could be used if people with disabilities cannot immediately return home after a disaster. Consider establishing temporary housing procedures to ensure that accessible hotel rooms are available on a priority basis to people with disabilities who need them.
- Establish policies and procedures to ensure that temporary housing information distributed to the public or to shelter residents includes information on accessible housing and transportation resources.

Post-Emergency Repair, Rebuilding, and Resumption of Program Operations

48. Have you established policies and procedures to ensure that the repair and rebuilding of government facilities comply with the most stringent accessibility requirements of CBC and Title II of the ADA?

☒ Yes

☐ No

49. Have you established policies to ensure that programs relocated from a damaged facility on a temporary or permanent basis remain accessible to people with disabilities?

☐ Yes

☒ No

ACTIONS:

If the answer to any of the above questions is "No," this is a red flag that your post-emergency policies and procedures may not be fully accessible to people with disabilities. Here are some steps to ensure that your post-emergency policies and procedures ensure access for people with disabilities.

- Establish policies and procedures to ensure that facilities constructed or altered because of emergency- or disaster-related damage comply with the accessibility requirements of Title II of the ADA and CBC Title 24. Facilities constructed after January 26, 1992, and repairs to such facilities, must comply with Title II's new construction requirements. Alterations to facilities constructed before the ADA became effective, must comply with Title II's requirements for alterations to existing facilities. Alterations may not decrease accessibility.
- Establish policies and procedures to ensure that programs relocated from a damaged facility remain accessible to people with disabilities, whether the relocation is permanent or temporary. Ensure that continuity of operations plans address continuity of access to programs, services, and activities for people with disabilities. Ensure that repair and clean-up activities include the maintenance of accessible features.