

LEE COUNTY

**504/ADA TITLE II/ADAAA SELF-EVALUATION  
OF POLICY, SERVICE AND PROGRAM COMPLIANCE**

**504/ADA Self-Evaluation Questionnaire Form**

This form will help you evaluate your department’s policies, services, and programs to ensure that they are accessible to people with disabilities. This self-evaluation process coincides with a new Department of Justice rule that becomes effective Oct. 11, 2016. That new rule results from the ADA Amendments Act of 2008 (ADAAA). It furthers the intention of Section 504 of the Rehabilitation Act of 1973, as amended (504), and the Americans with Disabilities Act of 1990 (ADA). This questionnaire is part of a comprehensive update of the County’s transition plan for ADA compliance.

Note that this survey focuses on policies and access to services and programs. The County has conducted separate surveys for transportation issues (roads and intersections, curbs, sidewalks), mass transit and physical structural issues (parking lots and entrances, physical barriers to points of service, restrooms).

**If you have questions regarding this process, or if you require this material in an alternate format, please contact Joan LaGuardia, ADA coordinator, 3-2314 or [jlguardia@leegov.com](mailto:jlguardia@leegov.com).**

**Identification**

**General Policy**

	Yes	No	NA
1. Does your staff fully understand the County policy of nondiscrimination on the basis of disability and take appropriate steps to facilitate participation of ADA-qualified individuals in services and programs?			
2. A. Is your staff aware of the County’s 504/ADA Coordinator? 2. B. Is your staff aware that County Administration will handle your requests for accommodation or ADA-related grievances? 2. C. Does your department also have a specialist for ADA issues? If so, please identify:			

	Yes	No	NA
3. Have you received requests for accommodation from ADA-qualified individuals in the past 12 months? Explain your standard operating procedure for handling accommodation requests.			
4. A. Is your staff aware of the County's 504/ADA grievance procedure? 4. B. Do you have a process for receiving ADA-related grievances, logging them and referring them to the County ADA Coordinator for processing? Explain your standard operating procedure for handling grievance requests. List the grievances you have referred in the past 12 months.			
5. Are Lee County's public notices of ADA rights and grievance procedure posted in your main service areas, major publications and in a method accessible to all members of the public?			
6. Does anyone on your staff routinely attend ADA-related training, events or meetings not sponsored by Lee County or regularly interact with a disability rights group to assist with recognizing accessibility issues and finding solutions? If yes, identify the employee and briefly explain the activity.			
7. How can Lee County Administration assist you further in accomplishing ADA compliance?			

**Access to Departmental Service and Programs**

	Yes	No	NA
1. Do you notify the public and other interested parties that your department's meetings, hearings, programs and other events will be held in accessible locations and that accommodations and auxiliary aids will be provided at no charge to ADA-qualified requestors? Explain your notification outreach and attach samples.			
2. Is information about your department's services or programs available on request in alternate formats for people who have disabilities?			
3. Is your staff aware of the procedure for safe emergency evacuation of people with disabilities from your facility(ies)?			
4. Do you apply and enforce regulations, rules, programs, awards and all other practices to allow full participation of individuals with disabilities?			
5.A. Have you reviewed your policies and practices for the possibility of direct or indirect effect of excluding or limiting the participation of			

individuals with disabilities? 5.B. If there is a possibility for direct or indirect exclusion, how will you alter or eliminate those policies or practices?			
6. Do you ensure that regulations, rules, programs, awards and all other practices do not limit participation by individuals who are recovering from past drug or alcohol usage?			
7.A. Are you aware of any programmatic barriers that prevent ADA-qualified members of the public from participating in your services and programs? 7.B. If yes, are you working with County Administration to prioritize a long-term solution? 7.C. Are you using non-structural modifications and programmatic alternatives to enable ADA-qualified individuals to receive services and participate in programs? 7. D. Do those options require ADA-qualified individuals to be served or located in segregated areas of your facility? 7. E. Do those options require ADA-qualified individuals to receive services or participate in programs at an alternate location?			
8. A. Do you advertise or market your services or programs in venues or media other than the County website, legal advertisements, or standard County outreach? 8. B. If yes, do you ensure that this communication is accessible to ADA-qualified individuals? C. Do you ensure that this communication portrays persons with disabilities in an appropriate manner?			

**Departmental ADA Planning**

	Yes	No	NA
1. Are you aware that the County has an ADA Self-Evaluation Report and Transition Plan?			
2. Do you have any ADA-specific departmental priorities or compliance targets or projects in addition to County Administration's? If so, explain:			
3. In the past 12 months, have you submitted any ADA or civil-rights related compliance forms to qualify for state or federal grants or programs? List them:			

	Yes	No	NA
4. Does your department have ADA accessibility issues related to historic properties or historic preservation programs? If yes, identify the historic property, the accessibility issue and options for solutions.			
5. Do you have concerns that a specific action to address ADA compliance will fundamentally alter the nature of a program or present an undue financial or administrative burden? If yes, explain.			

**Compliance of Subrecipients**

	Yes	No	NA
1. A. Are you a pass-through agency for any Federal or State grants or do you contract with any service providers to conduct programs or activities on behalf of your department?			
1. B. Do you verify that subrecipients and service contractors are aware of their obligation for ADA compliance?			