

Adams County Council on Aging Reasonable Modification Policy

1. Purpose

The purpose of the reasonable modification policy is to ensure that the Adams County Council on Aging offers equal and effective opportunities and access to public transportation services for persons with disabilities and full compliance with the provisions of the Title II of the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

2. Policy

The Adams County Council on Aging is committed to providing equal access and opportunity to qualified individuals with disabilities in all programs, services and activities. The Adams County Council on Aging recognizes that in order to have equally effective opportunities and benefits, individuals with disabilities may need reasonable modifications to policies and procedures. The Adams County Council on Aging will adhere to all applicable federal and state laws, regulations and guidelines with respect to providing reasonable modifications, as necessary, to afford equal access to programs for persons with disabilities. The Adams County Council on Aging does not discriminate on the basis of disability in admission to, participation in, or receipt of services and benefits under any transit program or activity. The Adams County Council on Aging will take appropriate steps to ensure that persons with disabilities have an equal opportunity to participate.

No qualified individual with a disability shall, by reason of such disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of the Adams County Council on Aging, or be subject to discrimination by the Adams County Council on Aging.

3. Reasonable Modifications

A reasonable modification is a change or exception to a policy, practice, or procedure that allows disabled individuals to have equal access to programs, services, and activities. The Adams County Council on Aging will make reasonable modifications to policies, practices and procedures when necessary to ensure access to transit services for qualified individuals with disabilities, unless:

- Making the modification would fundamentally alter the nature of the public transportation service.
- Making the modification would create a direct threat to the health or safety of other passengers.
- The individual with a disability is able to fully use the Adams County Council on Aging's service without the modification being made.

For the purposes of this section, the term reasonable accommodation shall be interpreted in a manner consistent with the term "reasonable modifications" as set forth in the Americans with Disabilities Act Title II regulations at 28 CFR 35.130(b)(7), and not as it is defined or interpreted for the purposes of employment discrimination under Title I of the ADA (42 U.S.C. 12111–12112) and its implementing regulations at 29 CFR part 1630.

4. Eligibility Criteria

An individual is eligible to be considered to receive a reasonable modification if that individual has: a physical or mental impairment that substantially limits one or more of the major life activities of such individual; a record of such impairment; or been regarded as having such impairment.

5. Requests for Reasonable Modifications

The Adams County Council on Aging shall make information about how to contact the Adams County Council on Aging to make requests for reasonable modifications readily available to the public through its website and rider policy guidelines. The Adams County Council on Aging shall follow these procedures in taking requests:

- Individuals requesting modifications shall describe what they need in order to use the service.
- Individuals requesting modifications are not required to use the term “reasonable modification” when making a request. Personnel at this agency will determine if the request represents a reasonable modification and proceed in accommodating the request accordingly.
- Whenever feasible, this agency requests that individuals make such requests for modifications before this agency is expected to provide the modified service.
- Where a request for modification cannot practicably be made and determined in advance (*e.g.*, because of a condition or barrier at the destination of a paratransit, demand response, or fixed route trip of which the individual with a disability was unaware until arriving), operating personnel shall make a determination of whether the modification should be provided at the time of the request. Operating personnel may consult with The Adams County Council on Aging’s management before deciding to grant or deny the request.

Requests for modification may be made either orally or in writing. The reasonable modification process begins as soon as the request for modification is made.

The request can be submitted in any written format. Alternative means of filing a request, such as personal interviews, phone calls, or taped requests, will be made available for persons with disabilities if unable to communicate their request in writing or upon request.

6. Interactive Process

When a request for modification is made, the Adams County Council on Aging and the individual requesting a modification must engage in a good faith interactive process to determine what, if any, modification shall be provided. The individual and the Adams County Council on Aging must communicate with each other about the request, the process for determining whether a modification will be provided, and the potential modifications. Communication is a priority throughout the entire process.

7. Time Frame for Processing Requests and Providing Reasonable Modification

The Adams County Council on Aging will process requests for reasonable modification and then provide accommodations, where appropriate, in as short a time frame as reasonably possible. The Adams County Council on Aging recognizes, however, that the time necessary to process a request will depend on the nature of the modification(s) requested and whether it is necessary to obtain supporting information.

8. Granting a Reasonable Modification Request

As soon as the Adams County Council on Aging determines that a reasonable modification will be provided, that decision shall be immediately communicated to the individual. This notice must be in writing in order to maintain the required information for reporting purposes. Upon request, alternative means of response will be provided.

In choosing among alternatives for meeting nondiscrimination and accessibility requirements with respect to new, altered, or existing facilities, or designated or specified transportation services, the Adams County Council on Aging shall give priority to those methods that offer services, programs, and activities to qualified individuals with disabilities in the most integrated setting appropriate to the needs of individuals with disabilities.

9. Denying a Reasonable Modification Request

As soon as the Adams County Council on Aging determines that a request for reasonable modification will be denied, the Adams County Council on Aging will communicate the basis for the decision in writing to the individual requesting the modification. The explanation for the denial will clearly state:

- a. The specific reasons for the denial;
- b. Any alternative accommodation that may create the same access to transit services as requested by the individual; and
- c. The opportunity to file a complaint relative to the Adams County Council on Aging's decision on the request.

10. Complaint Process

The Adams County Council on Aging has a process for investigating and tracking complaints from qualified individuals. These procedures shall be posted on the Adams County Council on Aging's website and will be provided to any individual where the Adams County Council on Aging has denied a request for modification. The process and any forms necessary to file a complaint are readily available from the web. Alternative means of filing complaints, such as personal interviews, phone calls, or taped requests, will be made available for persons with disabilities if unable to communicate their request in writing or upon request.

Any person who believes she or he has been discriminated against in obtaining a reasonable modification may file a complaint by completing and submitting a Adams County Council on Aging's Reasonable Modification Complaint Form. The Adams County Council on Aging investigates complaints received no more than 30 days after receipt. The Adams County Council on Aging will process complaints that are complete. Once the complaint is received, the complainant will receive an acknowledgement of receipt. If more information is needed to resolve the complaint, the Adams County Council on Aging may contact the complainant. The complainant has 30 business days from the date of the letter to send requested information to the Adams County Council on Aging.

If the Adams County Council on Aging is not contacted by the complainant or does not receive the additional information within 30 business days, the Adams County Council on Aging may administratively

close the complaint. In addition, a complaint may be administratively closed if the complainant no longer wishes to pursue their case.

After the Adams County Council on Aging investigates the complaint, a decision will be rendered in writing to the complainant. The Adams County Council on Aging will issue either a Letter of Closure or Letter of Finding.

- a. *Letter of Finding* – This letter will summarize the complaint, any interviews conducted regarding the complaint, and explains what actions will be taken by the Adams County Council on Aging to address the complaint.
- b. *Letter of Closure* – This letter will explain why the Adams County Council on Aging has determined that the complaint does not merit accommodation under the Americans with Disabilities Act and that the complaint will be closed.

If the complainant disagrees with the decision of the Adams County Council on Aging, an opportunity to appeal the decision may be pursued provided the complainant files notice of appeal within 21 days of the initial decision of the Adams County Council on Aging.

In the event of appeal, the complainant will be granted all due process, including the ability to be present additional evidence, present the case in person during an appeal hearing, and to be represented by counsel.

11. Designated Employee

The Adams County Council on Aging shall designate one official within the organization responsible for processing reasonable modification requests and handling complaints. This individual is:

Michelle L Lengerich, Executive Director
Adams County Council on Aging
1109 Dayton Street, Room 1
Decatur, IN 46733
260-724-5316
coadirector@co.adams.in.us

12. Record Retention

The Adams County Council on Aging will maintain all records related to reasonable modification requests and denials for at least three (3) years.

Reasonable Modification Program Complaint Form

| | | | |
|---|-------------|-------------------|------------|
| Section I: | | | |
| Name: | | | |
| Address: | | | |
| Telephone (Home): | | Telephone (Work): | |
| Electronic Mail Address: | | | |
| Accessible Format Requirements? | Large Print | | Audio Tape |
| | TDD | | Other |
| Section II: | | | |
| Are you filing this complaint on your own behalf? | | Yes* | No |
| *If you answered "yes" to this question, go to Section III. | | | |
| If not, please supply the name and relationship of the person for whom you are complaining: | | | |
| Please explain why you have filed for a third party: | | | |
| | | | |
| Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party. | | Yes | No |
| Section III: | | | |
| Date that Reasonable Modification was Denied (Month, Day, Year): _____ | | | |
| Explain as clearly as possible what happened and why you believe you should have received the modification request. Describe all persons who were involved. Include the name and contact information of the person(s) (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form. You may also attach other items that you think are relevant. | | | |
| _____ | | | |
| _____ | | | |
| Section IV | | | |
| Have you previously filed a complaint with this agency? | | Yes | No |

Signature and date required. Please submit the form in person or via mail/e-mail.

Signature

Date