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FRANKLIN COUNTY
DEPARTMENT OF SOCIAL SERVICES
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facsimile transmittal

To: Pam Parisier Fax: 473-0511

From: Lesley B. Lyon, Commissioner Date: 2/16/05

Re: AOA/LEP Self Evaluation Pages: 5 (Including Cover Sheet)
Review form for Franklin County

CC:

Urgent For Review Please Comment Please Reply Please Recycle

Comments: _____

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Thank you.....

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(Rev. 08/04)

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**AMERICANS WITH DISABILITIES ACT (ADA) LIMITED ENGLISH PROFICIENCY (LEP)
Self-Evaluation Form**

District _____ Form completed by: _____ Phone #: _____

Access - ADA

1. Do you have an ADA contact person within DSS who is responsible for social services program access and for the taking and resolution of complaints from applicants/recipients (A/Rs)?
 Yes No
2. If yes to #1, who is your ADA contact? Sue Robideau
 Please provide the ADA contact's telephone #: 518-481-1805
3. a. Has your district done a self-evaluation of program access by A/Rs with disabilities?
 Yes _____ (Please attach a copy of the report) No
- b. Were deficiencies found in the self-evaluation?
 Yes _____ (go to c.) No _____ (Go to #4)
- c. Were corrective actions taken?
 Yes _____ (Please attach copy of the corrective action plan) No _____
4. Do you have a written procedure for handling complaints from applicants/recipients who claim to have been denied access to social services programs due to a disability?
 Yes _____ (Please attach copy) No
5. Do you provide applicants/recipients (A/Rs) for social services programs with information about the ADA's prohibitions against discrimination?
 Yes (Please attach copy) No _____ attached.
6. Reasonable accommodation means an adaptation or alteration that gives an A/R with disabilities meaningful access to social services programs. Do you have written reasonable accommodation procedures?
 Yes _____ (Please attach copy) No
7. Do you have a procedure to insure that the A/R who is offered reasonable accommodation, but refuses, understands the consequences of that refusal?
 Yes _____ (Please attach copy) No

Access - General Disabilities

1. a. Are your facilities accessible to, and usable by, individuals with disabilities?
 Yes No _____
- b. Are your parking areas and sidewalks accessible to, and usable by, individuals with disabilities?
 Yes No _____

- c. Is the entrance wheelchair accessible? Yes No
- d. Are bathrooms and drinking fountains wheelchair accessible?
Yes No
- e. If the client area is above or below the 1st floor, are there elevators?
Yes No 1st floor only
- f. If No to a.. are services available at alternate accessible sites? Yes No

2. In social services districts with more than one district office, are all district offices accessible according to #1. a - e above.

Yes No (go to #3)

3. When one or more district office is not handicap accessible, is reasonable accommodation offered?

Yes (attach copy of reasonable accommodation plan, or specify) _____
 No

4. Do you have procedures for determining when home visits will be provided for A/Rs who are physically or mentally unable to travel to the office/center?

Yes (go to #6) No (go to #5)

5. If No to #4, what alternate accommodations are provided? _____

6. Are the home visit or alternate accommodations procedures in writing?

Yes (please attach a copy - go to #7) No (go to #7)

7. How is the district's policy regarding home visits or alternate accommodations conveyed to A/Rs?

by telephone or letter.
(Go to #8)

8. How is the district's policy regarding home visits or alternate accommodations conveyed to the appropriate LDSS staff? Staff Training.

Access - Visually/sight impaired

1. a. Are there signs in Braille for the visually/sight impaired?

Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Men's and Women's rooms
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Room Numbers
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Exits
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Permanent Rooms and Spaces
Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Elevators

b. If NO to any of the above, how does the visually impaired person find a necessary location?

Usually come with someone - have never had a problem.

2. Do you have procedures in place for A/Rs who, due to visual impairment, are unable to read the application, information booklets, notices, etc.?

Yes (Please provide copy) No

Not written. However they are advised to bring representative or referred to the visually handicapped assoc.

Access - Mental Impairment

1. Do you have procedures in place to assist a mentally impaired A/R?

Yes (Please provide copy) No *not written they are advised they can bring a representative*

Access - Hearing Impaired

1. Do you have procedures in place to assist hearing impaired A/Rs?

Yes (Please provide copy) No

2. Is a sign-language interpreter provided? Yes No

3. Does the office/agency have TTY/TTD equipment or New York Relay Services available?

Yes (Type of Service: _____) No

Access - Limited English Proficiency

1. Do you have procedures to assist limited or non-English speaking A/Rs?

Yes (Please provide copy) No *not written, however I keep a list of contacts also use the state contacts at OTDA + DOH*

2. Are the following available in other than English language?

Signs Yes No
Posters Yes No
Pamphlets Yes No

Other client handouts: Yes (Describe: _____) No

3. a. Is the "Language Poster" displayed in the waiting area? Yes No

b. Are the Language palm cards used? Yes No
however, they are available in the waiting area and reception desk

PA-13
Rev. 9/04

What You Should Know About Your Rights If You Have a Disability

If you have a physical or mental health impairment that substantially limits one or more major life activities, have a record of an impairment or are regarded as having an impairment, you may have rights under Section 504 of the Rehabilitation Act of 1973 and Title II of the Americans with Disabilities Act of 1990. These are laws that protect qualified individuals with disabilities. Physical or mental health impairments include, for example, learning disabilities, mental retardation, depression, mobility impairments, and hearing or vision impairments. A qualified individual is a person with a disability who meets the eligibility requirements for receipt of services or participation in programs or activities. If you are a qualified person with a disability:

- Having a disability will not disqualify you from receiving Temporary Assistance;
- You are not required to tell the social services official about your disability and you cannot be required to participate in an evaluation of your disability if you can successfully participate in work activities. However, if it becomes apparent that your disability is a barrier to successful participation, you can be required to cooperate with an evaluation of your disability;
- Any health information you provide to the social services worker will be kept confidential and will be used to determine if you need services and reasonable accommodations to help you participate in work activities;
- You are entitled to individualized treatment and effective and meaningful opportunities to participate in employment programs; and
- You may be required to apply for Supplemental Security Income (SSI).

The social services district will ask you if there is anything, including a physical or mental health impairment that might affect your ability to participate in work activities. If you think you may have a disability and need reasonable accommodations or services to help you participate in work activities, you may let your worker know. Reasonable accommodations may include, for example, reduced or changed work hours, accessible work sites, auxiliary aids, and specialized programs, including rehabilitation.

If you have a disability and you believe that the social services district did not adequately accommodate your disability when it assigned you to a work activity, you may request a conciliation conference with the social services district. You also have the right to request a fair hearing before an administrative law judge if you are not satisfied with the conciliation decision.

