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ABSTRACT

This handbook is designed to assist managers of ACTION grantee programs in evaluating the degree to which the needs of persons with disabilities are incorporated into their programs for physical accessibility of buildings and facilities. After a general discussion of self-evaluation principles and accessibility guidelines, a checklist is provided to help identify physical barriers to access in existing programs and buildings. The checklist focuses on measuring and evaluating accessibility of all the grantee's programs, activities, and services. Parking, elevators, ramps, entrances and interior doors, stairs, restrooms, drinking fountains, warning signs, conference areas, telephones, picnic areas, and other features are outlined in detail. (PB)

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# handicap accessibility



A Self-Evaluation Guidebook  
for ACTION and its Grantees



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*Jane A. Kenny* 5/21/92  
Jane A. Kenny, Director Date

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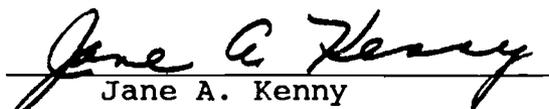
## DIRECTOR'S STATEMENT

Almost everyone knows someone with a disability, and any person may become disabled during his or her lifetime. Yet many people give little thought to the meaning of the words "handicap" or "disability," and few consider the wide range of people to whom they apply or realize their full implications.

Utilization of the abilities and potential of Americans with disabilities is a commitment of ACTION and its grantees. Technological advances are making incorporation of persons with disabilities into all aspects of the community and the work place easier. For example, computers can now interface with voice synthesizers to give visually impaired persons computer access, and telecommunications devices allow hearing impaired persons to communicate by telephone. These advances permit disabled individuals, or those who become disabled, to continue in their jobs.

In addition to work place accessibility, we need to concern ourselves with accessibility to programs and activities conducted by ACTION's grantees. To many people, "accessibility" means ramps and elevators for physically disabled people. But physical access is only one aspect of accessibility. This Handbook addresses many of the ways program accessibility may be achieved.

This Handbook is designed to assist managers of ACTION's grantees in evaluating the degree to which the needs of persons with disabilities are incorporated into our programs. Whereas policy can be developed, and guidelines and standards written to implement policy, words on paper have little meaning if they are not put into action. The degree to which we achieve accessibility for disabled persons is dependent upon efforts of the staff of its grantees. I hope this Handbook will be helpful to your organization in meeting the challenge of providing meaningful volunteer experiences that are accessible to all persons.

  
Jane A. Kenny  
Director

**1. PURPOSE**

This Handbook is the primary reference guide for all ACTION grantees with respect to their obligations under section 504 of the Rehabilitation Act of 1973, as amended [hereafter referred to as "section 504"]. Its purpose is to provide sponsors, projects, and work stations, with information to assist them in completing the self-evaluations and transition plans required by ACTION's section 504 regulations, 45 C.F.R. Part 1232. This Handbook does not review a grantee's obligations to its employees under section 504.

**2. APPLICABILITY**

These guidelines apply to all programs and activities funded by ACTION. These guidelines also apply to all programs and activities of ACTION's projects and sponsors, including offices and work stations.

**3. POLICY**

It is the policy of ACTION that the programs and activities funded by ACTION be readily accessible to and usable by individuals with disabilities. Grantees of ACTION funds shall operate their programs and activities so that when viewed in their entirety they are accessible.

**4. BACKGROUND**

This Handbook is issued under the authority of section 504 of the Rehabilitation Act of 1973, as amended, and supersedes Handbook 240 issued on September 21, 1990.

**5. RESPONSIBILITIES**

The Director of ACTION is ultimately responsible for ensuring implementation and enforcement, as well as for providing sufficient resources to administer the Agency's compliance program for accessibility to individuals with disabilities. Administration and oversight for implementation and enforcement of section 504 in ACTION rests with the Director, Office of Equal Opportunity. Day-to-day advice, guidance, and monitoring are provided by ACTION's field offices.

**6. GENERAL REQUIREMENTS FOR CONDUCTING SELF-EVALUATION AND A TRANSITION PLAN****a. Regulatory requirements for Self-Evaluation**

ACTION regulations implementing section 504 require that entities that receive Federal financial assistance conduct a self-evaluation to determine if their policies and practices

prevent or interfere with the participation of individuals with disabilities in their programs, services, or activities sponsors and their work stations have flexibility in determining how they will evaluate their accessibility. One example of a self-evaluation which may be used is provided in Appendix 1 (Program Accessibility). Regardless of which self-evaluation is used, the regulatory requirements, 45 CFR 1232.7, are as follows:

(c)(1) Each [grantee] shall . . . conduct a self-evaluation of its compliance with Section 504, with the assistance of interested persons, including handicapped persons or organizations representing handicapped persons. Each [grantee] shall with the assistance of and consultation with interested persons, including handicapped persons, evaluate its current policies, practices and effects thereof; modify any that do not meet the requirements of this part; and take appropriate remedial steps to eliminate the effects of any discrimination that resulted from adherence to these policies and practices.

(2) A [grantee] that employs fifteen or more persons shall, for at least three years following completion of the evaluation required under paragraph (c)(1) of this section, maintain on file, make available for public inspection, and provide to the Director upon request:

(i) A list of the interested person consulted.

(ii) A description of areas examined and any problems identified, and

(iii) A description of any modifications made and of any remedial steps taken (45 CFR 1232.7(c)).

Self-evaluations may have already been conducted for ACTION or for another Federal, State, or local agency. Those prior evaluations are sufficient to meet the self-evaluation requirements reviewed in this Handbook.

Policies and practices that result in the denial of participation to qualified individuals with disabilities must be removed or the programs otherwise modified to ensure that qualified individuals with disabilities have access to

programs and activities. Your organization's responsibility is to conduct a self-evaluation that focuses on the access of individuals with disabilities to your organization's programs and activities. Once a self-evaluation is completed and any corrective actions taken, continued attention should be given to ensure that accessibility continues. Unless there is a relocation, the focus of this continued attention should be on program accessibility.

b. Regulatory requirements for a Transition Plan

With respect to physical barriers that prevent access to your organization's programs or activities, 45 C.F.R. 1232.13 states:

(a) A [grantee] shall operate each program or activity to which this part applies so that the program or activity, when viewed in its entirety, is readily accessible and usable by handicapped persons. This paragraph does not require a [grantee] to make each of its existing facilities accessible to and usable by handicapped persons.

(b) A recipient is not required to make structural changes in existing facilities where other methods are effective in achieving compliance with this section. Where structural changes are necessary to make programs or activities in existing facilities accessible, such changes shall be made as soon as practicable, but in no event later than three years after the effective date of the regulations.

(c) In the event that structural changes to facilities are necessary to meet the requirements of paragraph (a) of this section, a [grantee] shall develop ... a transition plan which sets forth in detail the steps necessary to complete the changes. The plan shall be developed with the assistance of interested persons, including handicapped persons. A copy shall be made available for public inspection.

Transition plans may have already been developed for ACTION or another Federal, State, or local agency. Those prior plans, if implemented, are sufficient to meet ACTION's transition plan requirements.

c. Consultations on Self-Evaluation and Transition Plan Development

Persons with disabilities and other interested groups should be consulted during the self-evaluation process. Where physical barriers prevent access to a program or activity, a grantee must develop a transition plan, and the development of this plan must involve the input of interested persons. Such involvement is beneficial in a number of ways. For example, individuals with disabilities can frequently identify accessibility problems quickly and accurately and assist in developing remedies to those problems that are efficient and cost-effective.

d. Record keeping requirements

A copy of the documentation on work station and site self-evaluations and transition plans may be submitted to the Older Americans Volunteer Program (OAVP) sponsor or VISTA project so the sponsor or project can more easily determine the accessibility of the program when viewed in its entirety. The "Handicap Accessibility Self-Evaluation Certification" (OMB 3001-0128) is the only form required by ACTION to be completed by the OAVP sponsors and work stations as well as VISTA projects and sites. Each OAVP work station and VISTA site must submit this form to its sponsor or project. The OAVP sponsor or VISTA project then submits a consolidated form to its ACTION State program office for the entire program.

e. Categories of disabling conditions to consider

There are five categories of disabilities which should be given primary consideration when conducting a self-evaluation and, where necessary, preparing a transition plan:

- (1) Mobility impaired persons;
- (2) Visually impaired persons;
- (3) Hearing impaired persons;
- (4) Mentally impaired persons; and
- (5) Persons with diseases or addictions.

Mobility impaired persons include those with physical disabilities requiring their use of wheelchairs, as well as those who rely on crutches, canes, walkers, or other aids or appliances for mobility. Mobility impaired persons also include those with "invisible" physical impairments which

inhibit mobility, such as heart or respiratory problems. Visually impaired persons include the 10 percent of severe visually impaired persons who are totally blind (with no vision or light perception), the 40 percent who are legally blind, as well as those with lesser degrees of visual impairments.

Hearing impaired persons include the one percent of the population which is severely deaf, as well as the additional 6 percent which is hearing impaired. Nearly three-fourths of all hearing impaired persons are over 45 years of age. Another 4.5 percent of the population who are without hearing aids could benefit from some type of amplification system.

Mental impairments are an often overlooked area. They include those individuals with mental retardation, learning disabilities, and emotional disturbances.

Persons with addictions include those suffering from alcoholism or drug addiction (prescription drugs, over-the-counter drugs, or illegal drugs). Persons with diseases include diseases which impair a major life activity. For example, cancer or heart disease may impair stamina or limit physical exertion in some persons, while in others, or at different stages, it may not cause an impairment. It also includes those with contagious diseases such as acquired immune deficiency syndrome (AIDS) or tuberculosis (TB).

## 7. HOW TO CONDUCT A SELF-EVALUATION AND A DEVELOP TRANSITION PLAN

### a. Self-Evaluation

A self-evaluation is a careful examination of your organization's policies and practices to determine the extent, if any, to which individuals with disabilities are precluded from or limited in participating in your organization's programs and activities. The goal of a self-evaluation is to identify methods for increasing accessibility where policies and practices hindering program accessibility exist.

In a self-evaluation, the focus should be on the policies and practices that prevent access to a program or activity. This review might include the following:

- (1) Eligibility requirements, including medical exams.
- (2) Clients and volunteer materials such as orientation and safety information, sign-in logs, and job postings.
- (3) Public notification information such as brochures, radio spots, videos, newspapers and personal appearances.

- (4) Transportation and meals.
- (5) Meetings, including publicity for them, presentations at them, and hand-outs connected with them.
- (6) Special events, talks, films, slide shows, demonstrations, recreational activities, etc.

A federally assisted program or activity encompasses a wide variety of activities undertaken by a grantee in carrying out its functions. Services provided by your program to clients and program beneficiaries, including volunteers, are covered, as are things that your organization does which affect the public (meetings; conferences; publicity brochures or videos; responding to questions in person, telephonically, or via correspondence, etc.). Employment and volunteer service practices are also covered.

In a self-evaluation, the policies and practices are examined. An easy way to identify customary practices is to determine what conditions must be present for individuals with different kinds of disabilities to participate fully in your organization's programs and activities.

Analyze how policies and practices affect individuals with disabilities who seek to participate in the grantee's programs and activities. In this analysis, the fact that discrimination can happen not only as a result of what is in the policies, but also as a result of what is not in the policies, must be taken into account. Limitations in the regulations must also be considered. For example, modifications for program accessibility are not required if they would result in fundamental alterations to a program or undue financial and administrative burdens. Some of the areas that should be examined and addressed are discussed briefly below [this is not an exhaustive list]:

- (1) Any policy that excludes or limits the participation of individuals with disabilities in the programs should be carefully examined. If the policy is retained, the self-evaluation should contain a justification for the policy.

Example: In a program, all volunteers with disabilities are excluded from placement in day care centers, and safety reasons are cited to justify this policy. The policy should be modified so that the specific disability is considered as it affects the specific duties to be performed. Playground supervision by volunteers using a walker or blind volunteers may indeed cause safety concerns. But mobility impaired volunteers can lead creative arts and

crafts activities, for example.

- (2) How the agency notifies the public about its nondiscrimination policies and how it can best do this with respect to individuals with disabilities must be examined.

Example: Does your organization have a participant manual? Does it notify readers about your nondiscrimination policies? Is the manual available on audio cassette for visually impaired persons? If it is not maintained on audio cassette, can your organization make it available in a short time frame if requested? If so, how does your organization notify persons of this capability?

- (3) If contractors are used to conduct part of the program, the procurement documents should ensure that contractors are aware that they must comply with section 504 when performing activities on behalf of your organization, and compliance with this provision must be monitored.

Example: In a literacy program, your organization contracts with a "books on wheels" service which periodically brings to your site a library located in a large van. Is the van accessible to mobility impaired persons? Does the library include large print and/or braille books for the visually impaired? Does it include easy-to-read books for persons with learning impairments? Regarding audio cassettes for totally or almost totally blind persons, your organization needs to consider the primary purpose of your program. If it is to teach reading, then providing books on audio cassettes would not achieve the purpose. If it is to allow persons to enjoy literature, then audio cassettes would be an integral part of the program.

- (4) Consideration must be given to how persons with severe hearing impairments communicate by telephone. One way to communicate with a hearing impaired individual is to purchase or share a telephone device for the deaf (TDD) and list the number in the commercial telephone directory (a TDD is simply a telephone/typewriter combination costing \$200-\$300). Consideration may also be given to using the services of a TDD relay system. Under the Americans with Disabilities Act, all public telephone companies must have a relay system available, effective on July 26, 1993.

Example: Volunteers are placed in a hospital or nursing home. If a patient has a severe hearing

impairment, how is he or she able to communicate with family and friends? If a patient has a lesser hearing impairment, does the hospital have telephones available with amplification devices? How do family and friends with severe hearing impairments communicate with patients or inquire about a patient's condition? Note: nothing requires your organization to provide, for example, TDD's for families of patients, but your organization should be able to communicate with families who have them.

- (5) A policy on the provision of readers for visually impaired persons, interpreters for hearing impaired persons, and amanuenses (i.e., persons who take dictation) for manually impaired persons should be established. A method for securing these services should be developed, along with guidance on when and where these services will be provided.

Example: Volunteers work in a library with a computerized "card catalog" system. Voice synthesizers, electronic personal readers and talking computers give visually impaired, blind, and dyslexic individuals computer access. (Much of this equipment is compatible with word processing, communications, and braille conversion software packages and is useful in the employment context.)

Some of these accessibility devices can be expensive and therefore must be considered in the context of reasonableness. On the other hand, there may be other less expensive and yet practical ways to provide accommodation, such as assigning a staff member to assist persons, or providing portable electronic magnifying systems to enable partially sighted individuals to read and write.

- (6) If television, video, or other audiovisual presentations are used as part of the program, captioning should be considered.

Example: Volunteers work at a museum or historic site which presents movies to the public to explain the significance of the site. Movies and other audiovisual presentations should be captioned to provide accessibility to hearing impaired persons or have a sign language interpreter on the screen. (Captioning is a process by which the audio portion of a video recording is converted into written words, thereby allowing the hearing impaired viewer to read the dialogue and see the recorded program simultaneously.) If a movie or slide show is not captioned, a copy of

the script should be available for use by hearing impaired persons, with the availability of such script prominently noted at the information desk.

If the site or museum also conducts narrated tours, copies of the script of the verbal presentations should also be available for use by hearing impaired persons. Signers should be made available to assist hearing impaired persons at large, regularly scheduled presentations.

(If the tour is of an historic home, for example, accessibility into the building does not mandate accessibility for mobility impaired persons into each room or floor. Significant features and items may be made accessible by means of an audiovisual presentation or a photograph album. The key is that all persons are able to enjoy the museum or historic experience.)

"Talking wands" allow visually impaired persons to enjoy exhibits. They carry this wand which, when pointed at an exhibit, "tells" them about the exhibit. Such a wand operates by generating a magnetic field or radio waves.

- (7) A review should be made of printed material used in programs to ensure that it is usable by visually impaired persons.

Example: Most programs have manuals, directives, brochures, etc., that govern or publicize them. Material prepared on a computer is easily produced in a large print format merely by changing print size and fonts. Printing on yellow paper is also helpful; high contrast colors provide better visibility, and the easiest to read is blue print on yellow paper. For the more severely impaired, audio cassettes or braille provide accessibility (remember, however, that most visually impaired persons do not read braille). Libraries, organizations for the visually impaired, and other volunteer programs read material onto audio cassette at minimal cost.

- (8) Consideration should be given to how best to make meetings or conferences accessible to hearing impaired and mobility impaired persons.

Example: A drug project holds a public meeting to explain its objectives and approach, and to elicit the support and enthusiasm of the affected public. Does the publicity material state that the meeting room is accessible? Can mobility impaired persons get into the

building, follow an accessible route to the meeting room, enter the meeting room itself, and use amenities such as restrooms, water fountains, and parking?

How can hearing impaired persons participate in or understand the content of the meeting? Lip-readers need to be able to sit in the front and have a view of the speaker which is unobstructed by a microphone. Audience questions need to be restated by the speaker. Signers can be provided to interpret for those who read sign language. Written transcripts of the speech are helpful during the meeting, as are a complete transcript or a captioned video tape after the meeting. [Captioned videos are particularly effective for use in training sessions.]

- (9) All signs, exhibits, displays, wall directions, etc. should be examined for accessibility.

Example: Almost every building has displays and signs. Many have wall directories and/or bulletin boards in the lobby or on each floor. Small letters high on a wall may not be readable by short persons, those in a wheelchair, or those with limited vision. Use of high contrast colors and non-glare glass, as well as braille letters, also provide accessibility.

Program exhibits, whether on walls, in display cases, or free standing, need to be able to be enjoyed by all. Identification of exhibits with short descriptive signs, in large print, provides accessibility to hearing impaired persons and to those with limited eyesight. Audio cassettes describing each exhibit or display should be available for use by visually impaired persons. Tactile exhibits should be available for touching by visually impaired persons. Replicas of exhibited items may be used for tactile purposes.

- (10) If the agency is involved in a transportation program or provides transportation, e.g., to its volunteers or clients, careful consideration should be given to making it usable by individuals with disabilities.

Example: Volunteers work in a school program and the children are taken on a field trip. There is a child at the school who uses a wheelchair. The contract with the bus company should specify that the bus be equipped with a lift. If such a bus is not available, special transportation services may have to be arranged to allow the child to join the other students on the field trip.

- (11) The procedure for the emergency evacuation from buildings of individuals with disabilities must be examined. In addition to installing visual and audible warning signals in facilities, other procedures for notifying and evacuating individuals with disabilities may need to be developed.

Example: A multi-story building has an elevator which is clearly marked "In case of an emergency, use stairs." A procedure needs to be developed to evacuate mobility impaired persons (those using wheelchairs or walkers, those with difficulty walking, those who are severely visually impaired, those with heart conditions, etc.), perhaps by special use of the elevator unless the emergency prohibits it. Your organization can determine persons who need evacuation assistance by asking them to self-identify themselves (do not have someone ask people, "are you disabled?"). Do not forget to include visitors with mobility impairments in your procedures.

- (12) The way that individuals with disabilities are referred to and portrayed in written and audiovisual material produced by your organization should be examined. A policy may have to be developed to ensure that such references are not offensive or demeaning.

Example: Your organization has a program and a video is prepared to solicit contributions. Are any persons portrayed who have visible disabilities? How are they portrayed -- only as feeble clients in need of assistance or as vibrant, capable volunteers and program administrators?

- (13) Notice Requirements: Each grantee or recipient is required to disseminate information to their employees, applicants, participants, beneficiaries, visitors, and other interested persons of the rights and protections afforded by section 504. Notice must be given:
- (a) Of the right to participate in the programs or activities regardless of an individual disability.
  - (b) Of any special procedures used by individuals with disabilities.
  - (c) That meetings, hearings, conferences, etc. will be held in accessible locations and that auxiliary aids will be provided, upon request and whenever possible, to participants with disabilities.

- (d) About how and with whom to file a discrimination complaint on the basis of disability by participants, beneficiaries, volunteers, visitors, etc., because of services provided or denied to them.
- (e) About how and with whom to file a discrimination complaint on the basis of disability because of employment and volunteer practices.
- (f) That each work station has issued a written assurance that neither volunteers nor beneficiaries served will be discriminated against on the basis of disability regarding employment or volunteer service practices, or regarding building or site access for programs or the work station's programs or activities, when viewed in their entirety.

The information may be disseminated in printed handouts, handbooks, manuals, posters, television and/or radio broadcasts. The information should be provided in a manner that is accessible to the general public, including persons who may be hearing impaired or visually impaired.

## b. Transition Plan

A transition plan is required where it is determined that structural changes to a facility are necessary to provide program accessibility. See Appendix A (Handicap Accessibility Checklist - Building and Site Accessibility) for a list of factors you may wish to consider in determining whether it will be necessary for your organization to develop a transition plan. In developing a transition plan, the focus is on physical barriers that may prevent access to a program or activity. The determination whether a transition plan should be done is generally based on a "walk-through" of buildings and an analysis of how a program operates. The suggested steps in determining whether a transition plan is necessary are as follows:

### (1) Identify Areas to be Evaluated

The physical areas to be included are those used by:  
(1) the clients served by the program, (2) the volunteers, and (3) the general public. These areas might include:

- (a) Entrances and doorways.
- (b) Hallways and walkways.

- (c) Offices, meeting places, and spaces where the clients are served or training sessions or conferences are held.
  - (d) Stairs and elevators.
  - (e) Restrooms.
  - (f) Outdoor areas such as parking lots, picnic areas, playgrounds, and sidewalks.
  - (g) Amenities such as drinking fountains, display or exhibit areas, signs (directional or informational), and emergency systems.
- (2) Conducting the "Walk-Through"

A "walk-through" evaluates a building or site for physical accessibility to programs and activities located in the building. Initially, elements are measured and compared to standards, e.g., the Uniform Federal Accessibility Standards (UFAS), a standard for accessibility used by and for the Federal government. Standards for certain selected elements under UFAS are set forth in Appendix 1 (Handicap Accessibility Checklist - Buildings and Site Accessibility).<sup>1</sup> If certain building elements do not meet a particular standard, then you should assess whether this failure prevents program accessibility.

The only equipment probably needed is a tape measure. Some suggested considerations are set forth below. While many sponsors and work stations may find it easier to follow factors listed in Appendix 1 to determine whether a transition plan is necessary, others may elect to make this determination on whether to develop a transition plan in a more informal manner.

The first concern is how to get into the facility. Does a curb or do steps inhibit access to someone in a wheelchair? Is any entrance ramp too steep? Are there loose mats or carpeting? Can someone in a wheelchair get through the front door -- is it wide enough and does it have a low enough lip?

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<sup>1</sup> Section 504 requirements involving issues of physical accessibility may fall under UFAS authority. Most determinations of the adequacy of accessibility can be made by using checklists based on UFAS standards. Should you need to refer to the UFAS itself, you may call the Architectural and Transportation Barriers Compliance Board at 1-200-USA-ABLE or the Department of Justice Civil Rights Division at 202-514-0301 or 202-514-0381 (TDD).

Is the door so heavy that someone with upper body impairments cannot open it? [Rule of thumb: an exterior door cannot be harder to open than a refrigerator door.] If the door is too heavy, is a receptionist or security guard on duty at the door assigned to provide assistance? If so, is there a doorbell or buzzer, and a sign instructing those in need of assistance to ring the bell or buzzer? [Instructions printed in large letters and in braille are very helpful.] If the front entrance is not accessible, is there another entrance that is accessible? If so, is there a sign directing persons to the accessible entrance?

The second step is to look at any lobby or reception area. Is there an accessible route through it (wide enough, high enough, with a firm and non-skid surface, with nothing protruding very far into it along the sides unless it is at or near the floor or there is something underneath it so that someone using a cane can be alerted to the upcoming obstacle)? Is there room for two wheelchairs to pass one another? Are displays, directories, etc., in large print, behind non-glare glass in high contrast colors and at a low enough level for someone in a wheelchair to read? Braille directories are helpful. If a directory is not accessible, is there a receptionist or security guard on duty in the lobby to provide assistance?

The third step is to examine the areas where the programs are conducted. If the program is a school, the classrooms, library, etc., must be examined. If the program is a museum, your organization must look at the exhibit areas.

If the program is a hospital, each patient's room need not be accessible, but some must be. In addition, lobbies and hallways used by patients or visitors, dining and meeting rooms, etc., must be accessible.

Someone in a wheelchair must be able to get into and through the rooms or program areas. Is the door wide enough and does it have a low enough lip? Is it easy to open (much easier than a refrigerator door)? (If an automatic door closer makes it too hard to open, the closer is easily adjusted with a screwdriver.) Is there an accessible route through the rooms or program areas? If multi-leveled, is there an elevator (which is large enough, has low and tactile buttons and audible and visual signals) and/or ramps (which are not too steep, have appropriate handrails and lips) to connect the levels? If not, may all programs be accessed from the

first level? Are stairs accessible to visually impaired persons, i.e., are treads and risers uniform, are hand-rails continuous so they direct a user up and down the steps, and do they extend out straight at top and bottom landings to alert a user that the steps have ended?

Can visually and mobility impaired persons use the program facilities? Do furniture or equipment locations preclude wheelchair access or do protrusions from the wall create hazards to persons with visual impairments? Are tables and desks accessible? (A picnic-style table is easily made accessible by removing the end of one bench to allow side access for a wheelchair or by extending one end to allow access at that end.)

Is there auditorium or waiting room space for someone in a wheelchair? Are sinks accessible (no cabinets underneath, lever-type faucets, wrapped hot water pipes, lowered towel dispensers, etc.)? Are display cabinets accessible? Are automated equipment, e.g., xerox or vending machines, accessible (push button, low enough level, and room for a wheelchair in front)?

The fourth area to look at can be called "amenities." The rule is: nothing requires "amenities" to be provided, but if they are provided, at least one should be accessible. Where there are inaccessible "amenities" persons should be directed by a sign or otherwise to the nearest accessible one. "Amenities" include restrooms, public telephones, parking, showers, drinking fountains, and emergency warnings. Specific accessibility standards are set forth in the checklist.

For the fifth step: don't forget outdoor areas. If your organization's program has any outdoor areas, examine them for accessibility. Are sidewalks accessible from parking areas, public transportation, passenger loading zones, and the street? Are there curbs, "lips," or other obstacles that are too high to allow easy wheelchair access?

Do sidewalks and trails have sufficient unobstructed height so that visually impaired persons do not run into obstacles? Are they unobstructed by parked cars? Do all trails have a firm and stable surface? Do picnic areas have accessible tables, grills, trash receptacles, restrooms, and parking? Are fishing areas and boat docks accessible? Are there a sufficient number of facilities of concessionaires accessible? Are there designated parking spaces for individuals with disabilities?

A word needs to be said about rises in height -- whether to entrances, inside buildings, or along sidewalks, trails, etc. For example, if UFAS standards are applied, whenever a slope is greater than 1:20 (one inch in height to every twenty inches in length), a ramp or elevator must be used. In addition, ramps are to have a slope no greater than 1:12 under UFAS.

How does one measure slopes? First, measure the height at the highest point -- that is the first number of the ratio. Then measure the length of the slope -- that is the second number. Finally, using basic algebra, compare your measurements to the appropriate ratio.

For example, a ramp measures 4" high and 38" long. Is the slope too steep? Using algebra, create an equation using the height and solve for the length:

$$1/12 = 4/X$$

Here, X = 48". That is, for a 4" high ramp, the length must be 48" or more. In this example, the length is less than 48", so the slope is too great.

Another way to determine whether the slope is too steep is to use the appropriate table below. If the height is greater than 30", two ramps with a landing between them must be used.

<u>1:20</u>			<u>1:12</u>		
1	:	12	1	:	20
2	:	24	2	:	40
3	:	36	3	:	60
4	:	48	4	:	80
5	:	60	5	:	100
6	:	72	6	:	120
7	:	84	7	:	140
8	:	96	8	:	160
9	:	108	9	:	180
10	:	120	10	:	200
11	:	132	11	:	220
12	:	144	12	:	240
13	:	156	13	:	260
14	:	168	14	:	280
15	:	180	15	:	300
16	:	192	16	:	320
17	:	204	17	:	340
18	:	216	18	:	360
19	:	228	19	:	380
20	:	240	20	:	400
21	:	252	21	:	420

22	:	264	22	:	440
23	:	276	23	:	460
24	:	288	24	:	480
25	:	300	25	:	500
26	:	312	26	:	520
27	:	324	27	:	540
28	:	336	28	:	560
29	:	348	29	:	580
30	:	360	30	:	600

A cross slope (perpendicular to the route of travel) is more difficult to measure. Cross slopes are found where the ramp tilts somewhat to bend around a corner. If UFAS standards are applied, a cross slope may be no greater than a ratio of 1:50, and is to be measured at the areas of greatest tilt. The difficulty is in finding the base for measuring the height of the slope. Remember that the concern is that a wheelchair not tip over sideways when going up or down a ramp.

The sixth step is to evaluate any areas used by your organization's volunteers. Most areas will probably overlap with the program rooms or areas and duplicate evaluations are not needed. But any offices used by your volunteers need to be examined, as do any staff dining areas, kitchens, restrooms, etc., used by volunteers.

The last step is to evaluate any areas used by the public. Again, most areas will probably overlap rooms or areas already evaluated. But offices used to meet members of the public, e.g., your director's office and your public relations office, need to be examined. Any conference rooms, auditoriums, and meeting space not already looked at need to be examined.

Finally, it should be noted that safety concerns often overlap with accessibility concerns. For example, consideration should be paid to placing accessible first-aid boxes at strategic locations in a facility. Emergency evacuation procedures for buildings must consider persons with disabilities. Hot water pipes in restrooms should be wrapped with tape to avoid burns. Accessible coat hooks should be placed where they are not a safety hazard. Door knobs to hazardous areas, such as electrical or telephone wiring or rooms where cleaning liquids are stored should be knurled or roughened so as to alert visually impaired persons to potential hazards.

(3) Assessing Results and Identifying Any Corrective Actions Needed

The programs and activities of ACTION's sponsors, when viewed in its entirety, must be accessible to, and usable by, persons with disabilities. This requirement does not, however, mandate that each existing facility, or every part of a facility be accessible to, and usable by persons with disabilities. For example, not every work station for a project must be accessible. Nor must each floor or each room of a structure be physically accessible. The important factor is that the experience offered by the program or activity be available for enjoyment and benefit of all persons.

(a) Physical Accessibility

During the "walk-through" phase, all physical elements were examined, measured and compared to an appropriate accessibility standard. During the assessment phase, consider the effect any identified variances will have on the accessibility of your organization's programs or activities.

Variance from an accessibility standard does not, by itself, mean that a building element constitutes a significant problem in terms of program accessibility. Consideration should be given to how great that variation is and what its effect is on the participation of individuals with disabilities in the program. Your organization must then decide if the effect on access is significant enough to warrant making physical changes in the facility or whether other modifications in the program will afford accessibility. Some building elements are more important than are others. The key elements are: entrances, passageways, restrooms, drinking fountains, and elevators. Occasionally, other building elements are also crucial because of the particular nature of the program or facility.

(b) Program accessibility

Programs or activities must be analyzed to determine how closely and in what ways they are tied to and depend on the facility. This is important because some programs and activities are closely tied to the facility in which they are conducted and some are not. The degree to which the program is dependent on the facility can have a significant influence over the strategy employed to

achieve program accessibility.

For example, a training program that requires the use of special equipment that is not portable is highly dependent on the facility in which the equipment is located. In order to make this training program accessible, access to the facility is essential. In contrast, a public hearing in which agency representatives listen to complaints or opinions expressed by members of the public is not highly dependent on the facility in which it takes place. In order to make the public hearing accessible, the accessibility of any particular facility may not be important because the hearing can be held in any number of facilities, and the most accessible facility can be used.

(c) Making Needed Changes

In developing solutions, consider two strategies: making nonstructural changes in the program to avoid the effects of physical barriers, and making structural changes to eliminate physical barriers. Often program accessibility can be achieved by making either structural or nonstructural changes.

Both strategies have advantages and disadvantages. Although structural changes to facilities are sometimes expensive, it is a one-time cost that can enhance the usefulness of the facility in ways other than promoting accessibility for disabled persons. Nonstructural changes are usually not expensive, but they can be administratively burdensome to implement and they frequently require action over a long period of time.

Priorities should be developed for making structural changes. For example, solving an access problem that prohibits individuals with disabilities from entering a program's only or principal facility should obviously be a very high priority item. Making minor adjustments to features that do not conform precisely to design standards but that do not significantly impede access, such as adjusting the level of the doorway thresholds in the facility from 5/8" to 1/2," should be treated as a lesser priority.

(d) Exceptions

Section 504 requires that newly constructed or altered buildings used by a grantee to conduct a

program or activity must comply with an accessibility design standard. These are mandatory standards.

These standards for ACTION grantees are:

1. For buildings built or altered between May 30, 1979 and January 17, 1991: ANSI A117.1-1961 (R 1971)
2. For buildings built or altered from January 19, 1991 to the present: UFAS

ANSI is a private, nonprofit organization that establishes voluntary standards for a wide variety of applications and products. Copies of the applicable ANSI standard (there are several and only the 1961 version, as revised in 1971, applies to ACTION grantees) can be obtained for \$5.00 from the American National Standards Institute, 1430 Broadway, New York, NY 10018.

Notes: If a grantee receives Federal financial assistance from several different Federal agencies, several different design standards may apply to the grantee's buildings. In addition, state and local governments have adopted design standards which may also apply.

Also, UFAS is more comprehensive than the other standards and if a building complies with UFAS it will comply with the other standards. The checklist for physical accessibility in this handbook sets forth the UFAS standards.

## HANDICAP ACCESSIBILITY CHECKLIST

- A. PROGRAM ACCESSIBILITY
- B. BUILDING AND SITE ACCESSIBILITY

**This checklist is presented as a guide to identify physical barriers that might restrict program access to individuals with disabilities. Use of this checklist is not mandatory. The building/site criteria are based on the Uniform Federal Accessibility Standards (UFAS) and specific citations are provided. If you answer "No" to any of the questions, it does not necessarily mean noncompliance because other methods of providing program access may be used.**

**This checklist is available on audio cassette or in large print from ACTION, Equal Opportunity Director, 1100 Vermont Avenue, NW, Washington, DC 20525 -- (202 606-4812 (voice), (202 606-5256 (TDD)).**

OMB No. 3001-0130

**PROGRAM ACCESSIBILITY: SUGGESTIONS FOR A SELF-EVALUATION**  
Background

A grantee may not deny the benefits of its programs, activities, and services to individuals with disabilities because its facilities are inaccessible. A grantee's services, programs, or activities, when viewed in their entirety, must be readily accessible to and usable by individuals with disabilities. This standard, known as "program accessibility," applies to all existing facilities of a grantee. Grantees, however, are not necessarily required to make each of their existing facilities accessible.

Grantees may achieve program accessibility by a number of methods. In many situations, providing access to facilities through structural methods, such as alteration of existing facilities and acquisition or construction of additional facilities, may be the most efficient method of providing program accessibility. A grantee may, however, pursue alternatives to structural changes in order to achieve program accessibility. Nonstructural methods include acquisition or redesign of equipment, assignment of aides to beneficiaries, and provision of services at alternate accessible sites.

A self-evaluation is a grantee's assessment of its current policies and practices to determine whether there are obstacles to the grantee's program or activities. The self-evaluation identifies and corrects those policies and practices that are inconsistent with Section 504 requirements. As part of the self-evaluation, a grantee should:

1. Identify all of the grantee's programs, activities, and services; and
2. Review all the policies and practices that govern the administration of the grantee's programs, activities, and services.

Normally, a grantee's policies and practices are reflected in its regulation, administrative manuals or guides, policy directives, and memoranda. Other practices, however, may not be recorded and may be based on custom.

Once a grantee has identified its policies and practices, it should analyze whether these policies and practices adversely affect the full participation of individuals with disabilities in its programs, activities and services. In this regard, a grantee should be mindful that although its policies and practices may appear harmless, they may result in denying individuals with disabilities the full participation of its programs, activities, or services. Listed below are several areas a grantee should consider when conducting its self-evaluation.

**ELEMENT 1: PARTICIPATION OF INDIVIDUALS WITH DISABILITIES IN THE SELF-EVALUATION PROCESS (see TAG - 88-9)<sup>2</sup>:**

- a. Are individuals with disabilities and other interested persons involved in the self-evaluation process?
- b. Is the general public involved in the self-evaluation process?

**ELEMENT 2: POLICIES AND PRACTICES THAT LIMIT THE PARTICIPATION OF INDIVIDUALS WITH DISABILITIES IN THE ORGANIZATION'S PROGRAMS AND ACTIVITIES**

Consider your organization's formal and informal program eligibility and admission criteria or licensing standards. Particular attention should be paid to policies incorporating or establishing:

- physical or mental fitness or performance requirements;
- safety standards;
- testing requirements;
- educational requirements;
- work experience requirements;
- requirements based on disability;
- requirements that prohibit participation because of disability; and
- insurability requirements.

Do any of these standards or requirements have the direct or indirect effect of excluding or limiting the participation of individuals with disabilities in your organization's programs or activities?

Which of these standards or requirements will be altered or eliminated to allow participation by individuals with disabilities? How will your organization communicate these changes to your organization's staff and the public?

Which of these standards or requirements will be retained by your organization? What is your organization's justification for their retention?

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<sup>2</sup> Copies of Technical Assistance Guides (TAG's), which provide detailed technical implementation information, are available from the Coordination and Review Section, Civil Rights Division, U.S. Department of Justice, Washington, DC 20530, (202) 307-2222 (voice) or (202) 307-7678 (TDD). While TAG's may be helpful in gaining detailed knowledge of an area of accessibility, they are not necessary for completing this survey.

**ELEMENT 3: INFORMATION AND TRAINING FOR STAFF**

What staff members need to be aware of your organization's obligations and policies which enable individuals with disabilities to participate in your organization's programs or activities?

How has your organization informed/trained these staff members?

**ELEMENT 4: USE OF CONTRACTORS**

Does your organization use contractors to conduct programs or activities on behalf of your organization that are designed to provide services to your organization's beneficiaries? [If not, go to next element.]

How does your organization ensure both contractors and your organization's procurement officials are aware of their obligations to facilitate participation of individuals with disabilities in programs or activities contractors operate on behalf of your organization?

How does your organization monitor fulfilling this obligation?

**ELEMENT 5: TRANSPORTATION**

Does your organization provide transportation to volunteers, beneficiaries, visitors, etc.? [If not, go to next element.]

What procedures does your organization follow to make transportation accessible to persons with mobility, visual, and hearing impairments?

**ELEMENT 6: TELEPHONE COMMUNICATIONS**

How does your organization communicate telephonically with hearing impaired individuals?

**ELEMENT 7: DOCUMENTS AND PUBLICATIONS**

How does your organization make documents and publications readily accessible to and usable by visually impaired persons? Does your organization use audiotape, large print, Braille, computer disk or something else?

Does your organization portray individuals with disabilities in your organization's documents and in publications?

**ELEMENT 8: MEETINGS**

Does your organization require that meetings, hearings, and conferences be held, upon request, in accessible locations?

Are interpreters, readers, and/or adaptive equipment provided in an expeditious manner, when requested, for meetings, interviews, conferences, public appearances by organization officials, and hearings?

Does your organization ensure that individuals with hearing impairments who do not read sign language can participate effectively in meetings, conferences, and hearings via assistive listening devices or other means?

**ELEMENT 9: AUDIO-VISUAL PRESENTATIONS**

How does your organization make audio-visual presentations accessible to individuals with visual and hearing impairments?

Does your organization portray individuals with disabilities in audio-visual presentations?

**ELEMENT 10: EMERGENCY EVACUATION**

What equipment and/or procedures does your organization use to notify individuals with visual, hearing, and mobility impairments of emergency evacuation procedures?

**ELEMENT 11: ACCESSIBLE EQUIPMENT**

In providing services to your beneficiaries, is it necessary for your beneficiaries to use electronic or other types of equipment (such as computer terminals, copying machines, etc).

If so, how do you ensure that individuals with disabilities are provided access to and use of such equipment?

**ELEMENT 12: REASONABLE ACCOMMODATION (45 C.F.R. 1232.10)**

**Standard:** A grantee shall make reasonable accommodation to the known physical or mental limitations of an otherwise qualified beneficiary or volunteer with a disability unless the grantee can demonstrate that the accommodation would impose an undue hardship on the operation of its program.

Reasonable accommodation may include (1) making facilities used by beneficiaries, or volunteers readily accessible to and usable by individuals with disabilities, and (2) acquisition or modification of equipment or devices, the provision of readers or interpreters, and other similar actions. In determining whether

an accommodation would impose an undue hardship on the operation of your program, factors to be considered include:

- a. The overall size of your organization's program with respect to number of volunteers, number and type of facilities, and size of budget;
- b. The type of your organization's operation, including the composition and structure of your organization's volunteer force;
- c. The nature and cost of the accommodation needed.

Does your organization have policies that ensure reasonable accommodation is made to the known physical or mental limitations of an otherwise qualified beneficiary or volunteer with a disability?

**ELEMENT 13: NOTIFICATION**

How does your organization notify all persons (participants, beneficiaries, volunteers, visitors, and other interested parties, including those with impaired vision and/or hearing) of your organization's policy not to discriminate against qualified individuals with disabilities?

How does your organization notify all persons that your meetings, hearings, and conferences will be held in accessible locations and that auxiliary aids will be provided, upon request, to participants with disabilities?

How does your organization notify all persons about how and with whom to file a discrimination complaint on the basis of disability and what procedure are they told to follow?

**BUILDING AND SITE ACCESSIBILITY  
GENERAL INFORMATION**

**ORGANIZATION NAME:** \_\_\_\_\_

**FACILITY NAME AND ADDRESS (with city, state, and zip code):**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DATE REVIEWED:** \_\_\_\_\_

**REVIEWER'S NAME AND TITLE:** \_\_\_\_\_

**ADDRESS (if different from above):** \_\_\_\_\_  
\_\_\_\_\_

**PHONE (including area code):** \_\_\_\_\_

**PROGRAMS AND ACTIVITIES CONDUCTED IN FACILITY:** \_\_\_\_\_  
\_\_\_\_\_

**PURPOSE OF THIS CHECKLIST:** This checklist will help you identify physical barriers to program access in existing facilities. It provides guidance about the way building elements should be constructed to achieve maximum accessibility. Completion of the checklist will give you an idea of how far the facility is from the ideal, but failure to meet the standards in the checklist does not, by itself, mean that a building element constitutes a significant problem in terms of program accessibility. Consideration should be given to how great the variation is and what its effect is on the participation of individuals with disabilities in the program. If the effect on access is significant, consideration should be given to making physical changes in the facility or otherwise modifying the program in order to make the program accessible.

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**TOOLS NEEDED TO CONDUCT EVALUATION OF BUILDING AND SITE ACCESSIBILITY:** Generally, the only tool necessary to complete this checklist will be a tape measure. This checklist is generally based on the Uniform Federal Accessibility Standards (UFAS), which should be referred to for further information.

**ELEMENT 1: ACCESSIBLE ROUTE (UFAS 4.1-4.7)**

**Need:** People who walk with difficulty or use wheelchairs, crutches, canes or walkers need a wide, smooth, level, and firm surface. Sight-impaired people need a path free of hazards such as low-hanging or protruding objects undetectable by a cane.

- |   | <u>Yes</u> | <u>No</u> | <u>N/A</u> |
|---|------------|-----------|------------|
| 1. At least one accessible route connects all parts of facility?                                |            |           |            |
| 2. Minimum of 36" clear width except at doors?  |            |           |            |
| 3. Is there at least a 60" x 60" passing space at reasonable intervals?                         |            |           |            |
| 4. Minimum of 80" clear headroom?   |            |           |            |
| 5. Surface: non-slip, firm and stable?  |            |           |            |
| 6. Slope does not exceed 1:20? [If greater than 1:20, apply criteria for ramps and curb ramps.] |            |           |            |
| 7. Are routes not interrupted by 1/2" or more changes in level or steps?                        |            |           |            |
| 8. Are grates set in the direction of the route no more than 1/2" wide?                         |            |           |            |
| 9. At least one accessible route from transportation stops, parking, street and/or sidewalks?   |            |           |            |

Comments:

**ELEMENT 2: PARKING (UFAS 4.6)**

**Need:** People with mobility impairments need parking spaces wide enough to open car doors fully and get out with a wheelchair or mobility aid, that are close to the building or facility and that are on an accessible route from parking lot to building.

Yes    No    N/A

1. If any visitor parking is provided, are spaces reserved for individuals with disabilities? Suggested guideline:

<u>Total Parking in Lot</u>	<u>Accessible Spaces</u>
1-25	1
26-50	2
51-75	3
76-100	4
101-150	5
151-200	6
201-300	7
301-400	8

2. Reserved space(s) located closest to accessible entrance; on accessible route?
3. Is the space(s) at least 96" wide?
4. Access aisle next to space at least 60" wide?
5. Slope of space/access aisle no more than 1:50?
6. Accessibility symbol on space; mounted at a height unobscurable by a vehicle?

Comments:

**ELEMENT 3: RAMPS (UFAS 4.8)**

**Need:** People who use wheelchairs need gently sloped ramps with handrails, no drop-offs, and a smooth, stable surface with level top and bottom platforms for resting and turning.

Yes    No    N/A

1. Slope is least possible and no more than 1:12?
2. Cross slope (perpendicular to direction of travel) no more than 1:50?

Yes    No    N/A

3. Surface: non-slip, firm and stable?
4. Walls, railings or curbs at least 2" high to prevent slipping off ramp?
5. Level landing is as wide as ramp and at least 60" long at top and bottom of ramp and at each turn of ramp?
6. Ramp is at least 36" wide and rises no more than 30"?
  - a. If ramp rise is more than 6" and length is more than 72", are there handrails between 30-34" high which extend 1' beyond top and bottom of ramp?
  - b. Ends and edges rounded smoothly?
  - c. Solidly anchored and with fittings that do not rotate?
  - d. Parallel with slope of ground surface?

Comments:

**ELEMENT 4: ENTRANCES AND INTERIOR DOORS (UFAS 4.13 AND 4.14)**

**Need:** People with mobility impairments need a building entrance which is wide, smooth, level or ramped. Entrance doors must be wide, have adequate space for maneuvering on both the pull and push sides, and require light pressure and no twisting to operate.

Yes    No    N/A

1. At least one principle entrance, located on accessible route?
2. Accessible doors are standard single or double-leaf hinged doors, not revolving doors/turnstiles?
3. Is the door width at least 32" (if double doors are used, one must comply)?

Yes    No    N/A

4. Is door hardware no higher than 48" and push/pull type or lever operated?
5. Is the maximum opening force 8.5 lbs. on exterior hinged doors (about as much as needed to open a refrigerator door); 5 lbs. on interior hinged, sliding, or folding doors?
6. Are all thresholds no higher than 1/2" with beveled edge, and a slope no greater than 1:2?
7. Is there adequate maneuvering clearance at doors?

Comments:

**ELEMENT 5: ELEVATORS (UFAS 4.10)**

Need: All persons with disabilities benefit from elevators. For maximum usability, elevators must provide adequate maneuvering space, time to get to and enter the cab, be conveniently located, and have marked controls. Blind persons benefit from audible indications on direction of travel and floors, and tactile markings at all controls. Hearing-impaired persons need this information to be visual. Lifts benefit people with mobility impairments; they cannot substitute for elevators in new construction, but they can be a successful solution to existing stairs than cannot be ramped.

Yes    No    N/A

1. At least one serves each level on accessible route in a multi-story facility, unless levels are connected by ramps?
2. Is it an automatic self-leveling elevator with reopening devices?
3. Cars dimensions: if door opens in the center, floor at least 51" x 80"; if door opens on one side, floor at least 51" x 68"?
4. Hall call buttons: centered 42" or less from floor and lighted?

Yes    No    N/A

5. Car controls: highest control 48", buttons at least 3/4" and marked with raised characters?
6. Door remains open 3 seconds?
7. Visual and audible floor indicators provided?
8. If emergency information systems provided, audible alarms (bells or audible instructions) and visual signals (flashing alarms or written instructions) are used?
9. Automatically corrects over/under-travel within 1/2" when stopping at floor?
10. Door width at least 36"?
11. Floor is firm, stable and non-slip?
12. No more than 1-1/4" gap between car and landing platform?

Comments:

**ELEMENT 6: STAIRS (UFAS 4.9)**

Need: People with sight impairments need stairs of uniform tread and width, with handrails which guide them and which indicate landings.

Yes    No    N/A

1. Stair step heights are uniform; step depths are at least 11" and uniform?
2. No overhangs on steps greater than 1-1/2"; overhangs are curved?
3. Handrails meet requirements (discussed under ramps)?

Comments:

**ELEMENT 7: RESTROOMS (UFAS 4.16 - 4.26)**

**Need:** People with mobility impairments need restrooms that they can get to and use easily and safely. For maximum flexibility, fixtures need adequate clear floor space for close approach and turning. Some individuals require sturdily mounted grab bars for support or transfer. Controls and hardware must be within reach and easily operable. Hot, sharp, abrasive, or protruding objects are hazards.

Yes    No    N/A

1. If there are restrooms, at least one is provided on an accessible route?
2. Entrance door has at least 32" clear opening; lever handle or push/pull type hardware; identified by accessibility symbol?
3. Unobstructed space to allow for wheelchair?
4. Toilet stall doors at least 32" wide?
5. Adequate space for maneuvering in stalls?  
[Refer to standards for requirements for different configurations.]
6. In stalls, front partition and at least one side partition provide toe clearance at least 9" above the floor (if depth of the stall is greater than 60", toe clearance not needed)?
7. Grab bars are 33-36" high; located on back and side of stall; 1-1/4 - 1-1/2" diameter; 1-1/2" from wall; support 250 lb. force in any direction at any point; sharp edges/protrusions eliminated?
8. Toilet is 17"-19" high and located maximum 18" from center of toilet to closest wall?
9. For wall-mounted urinal, the basin opening is no more than 17" from floor; elongated rim; clear floor space 30" by 48" in front of urinals?
10. Toilet paper dispenser at least 19" above floor?
11. Sinks: height maximum 34"; drain and hot water pipes insulated; minimum 29" clearance below apron of sink?

Yes    No    N/A

12. Faucets: controls mounted no more than 44" above ground; hand-operated or automatic but do not require tight gripping, pinching or twisting of wrist?
13. Where there are mirrors, bottom edge maximum of 48" above floor?
14. Towel dispenser and disposal unit: operable part no more than 40" above floor?

Comments:

**ELEMENT 8: DRINKING FOUNTAINS (UFAS 4.12(9))**

Need: Persons in wheelchairs need drinking fountains mounted low so they can reach the spout. They need to be able to pull up under the fountain or along its side. Provision of a paper cup dispenser may be an appropriate alternative. Persons who have difficulty using their hands need controls that can be easily operated.

Yes    No    N/A

1. If fountains are available, 50% accessible on each floor; if only one is available, is it on an accessible route?
2. Spout mounted 36" above floor in front of unit with water flow at least 4" high and parallel to front of unit?
3. Controls operable with one hand without grasping or twisting?
4. Wall mounted: bottom of apron to floor at least 27"; built in: at least 30" x 48" in front of fountain?

Comments:

**ELEMENT 9: HAZARDOUS AREAS AND WARNING SIGNALS (UFAS 4.1.2 and 4.28)**

**Need:** People with visual impairments need audible emergency warning systems and to be alerted by touch to hazardous areas. Persons with hearing impairments need visual alarms.

Yes    No    N/A

1. If warning systems are provided, both visual (flashing) and audible provided? .
2. Door knobs to hazardous areas roughened.

Comments:

**ELEMENT 10: ASSEMBLY, MEETING and CONFERENCE AREAS (UFAS 4.1 and 4.33)**

**Need:** People who use wheelchairs need a level area from which they can view the performance area. Both the seating area and the performance area must be on an accessible route. Persons with hearing impairments need an auxiliary listening system.

Yes    No    N/A

1. Wheelchair spaces available?  
Suggested guideline:

<u>Total Capacity</u>	<u>Wheelchair Locations</u>
50-75	3
76-100	4
101-150	5
151-200	6
201-300	7
301-400	8

2. Wheelchair locations adjacent to accessible route and, whenever possible, ramped to different seating levels?
3. Performing areas on an accessible route?

Yes    No    N/A

4. For large areas, amplification system available (volume controls, wireless headphones, infrared -- audio loops and radio frequency are acceptable)?

Comments:

**ELEMENT 11: PUBLIC TELEPHONES (UFAS 4.1.2 and 4.31)**

Need: Persons who use wheelchairs need adequate clear floor space to pull up to the telephone and a low mounting height so they can reach all operable parts. Persons with hearing impairments need volume controls.

Yes    No    N/A

1. If public telephones, at least one accessible per floor?
2. Located on an accessible route with clear floor space 30" x 48" in front of phone?
3. Highest operable control 48" high for front approach, 54" for parallel approach?
4. Push button controls?
5. Any provision for the hearing impaired?

Comments:

**ELEMENT 12: PICNIC AREAS**

Need: Persons in wheelchairs need tables with one end extended or with a portion of a bench removed so that the table legs or benches do not prohibit access. Picnic tables need to be on an accessible route and located on a firm, level surface. Grills and trash receptacles need to be at an accessible height. Grills need to be located on a paved level textured surface, and trash receptacles need to have rounded corners so as not to be a safety hazard to visually-impaired persons.

Comments:

**ELEMENT 13: EXHIBITS, SIGNS AND INFORMATION DISPLAYS**

**Need:** Persons with disabilities need exhibits, signs and information displays adequately lighted, in high-contrast colors, in large, easy-to-read print, and at levels where the material may be read by short people or by persons in wheelchairs. Tactile objects allow visually-impaired persons to enjoy exhibits and displays. Audio information should be available to hearing-impaired persons in some other format.

Comments:

**ELEMENT 14: SEATING, TABLES, AND WORK AREAS (UFAS 4.32)**

**Need:** Persons in wheelchairs need seating with flat, clear floor space in front of tables, counters, and work areas, as well as sufficient knee clearance.

Comments:

**ELEMENT 15: OTHER BUILDING ELEMENTS AND SPECIALIZED FACILITIES**

Other building elements and special use facilities are not covered by these forms. Where access to these elements and facilities is essential for individuals with disabilities are to participate fully in your program or activity.

- \* Bathing facilities and showers -- UFAS 4.23
- \* Storage facilities -- UFAS 4.25
- \* Windows -- UFAS 4.12
- \* Dwelling units -- UFAS 4.34
- \* Food service facilities -- UFAS 5.0
- \* Health care facilities -- UFAS 6.0
- \* Libraries -- UFAS 8.0
- \* Mercantile -- UFAS 7.0

Copies of the UFAS may be obtained from ACTION State Offices.

## HANDICAPPED ACCESSIBILITY SELF-EVALUATION CERTIFICATION

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone Number (with Area Code): \_\_\_\_\_

I certify that a handicap accessibility self-evaluation has been:

\_\_\_ Completed on \_\_\_\_\_  
(date)

\_\_\_ Partially completed and will be done on \_\_\_\_\_  
(date)

The results of the self-evaluation(s) is (are) as follows:

\_\_\_ The recipients' program, when viewed in its entirety,  
is accessible and no corrective actions are required.

\_\_\_ The recipient's program, when viewed in its entirety,  
is accessible, but some corrective actions will be  
made.

\_\_\_ The recipient's program, when viewed in its entirety,  
is not accessible. FOR SPONSOR ONLY: Corrective  
action will be made by: \_\_\_\_\_

(date)

I understand that, if the organization has 15 or more employees,  
information on how the self-evaluation was conducted is to be  
made available for public inspection for 3 years after its  
completion. I also understand that this information will be  
available to ACTION officials upon request.

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(signature),

\_\_\_\_\_  
(name/title of responsible official)

Each OAVP station and VISTA site must submit this certification  
form to its OAVP sponsor or VISTA project. Each OAVP sponsor and  
VISTA project must submit this one form to its ACTION State  
office.

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