



# **AMERICANS WITH DISABILITIES ACT TRANSITION PLAN**

**July 15, 2013**

## INTRODUCTION

Title II of the “Americans with Disabilities Accessibility Act” (ADA) is the title that applies to public entities like state and city governments. The Americans with Disabilities Act of 1990 is divided into a number of titles. Title II requires nondiscrimination on the basis of disability, in state and local government services. These “public entities” – including departments, agencies, or other instrumentalities – are required to comply with the ADA.

Title II of the ADA therefore requires that all Program, Services and Activities (PSA's) of public entities, including those considered “instrumentalities” of the government, assure that individuals with disabilities have access to all of their:

- Programs
- Services
- Activities

Program accessibility means that, when viewed in its entirety, each program is readily accessible to, and usable by, individuals with disabilities. Program accessibility is necessary not only for individuals with needs related to mobility disabilities, but also to individuals with needs related to speech, cognitive, vision and hearing disabilities.

*City facilities, programs, services, policies, practices and procedures will be surveyed on an on-going annual basis, and the ADA Transition Plan may be revised to account for changes to City activities. This Plan will be posted to the City's website for review and consideration by the general public.*

## **PURPOSE**

The purpose of the Plan is to ensure that the citizens of Smyrna are provided full access to the City's programs, services and activities in as timely a fashion as is reasonably possible. The City's elected officials and staff believe the ability to accommodate disabled persons is essential to effective governance and the quality of life Smyrna residents seek to enjoy.

## **STATEMENT OF ACCESSIBILITY**

The City of Smyrna shall make reasonable modifications in policies, practices or procedures when necessary to avoid discrimination on the basis of disability, unless the City can demonstrate that making the modifications would fundamentally alter the nature of the service, program or activity. The City of Smyrna will not place surcharges on individuals with a disability to cover the cost involved in making programs accessible.

### **I. PHYSICAL BARRIERS**

The City owns a limited number of properties and/or locations from which offers programs, activities and services. Below is a list of the City's facilities:

1. City Hall
2. Parks & Recreation Community Center
3. Welcome Center/Museum
4. Library
5. Public Works
6. Brawner Hall
7. Taylor-Brawner House
8. Alene Wolfe Senior Center
9. Tolleson Pool
10. Police Department Headquarters
11. Fire Headquarters/Station # 1
12. Fire Station # 2
13. Fire Station # 3
14. Fire Station # 4
15. Fire Station # 5

Each of the City's facilities has been reviewed in light of several baseline conditions, including:

1. Access to parking and entry into facilities themselves;
2. Access to a clear and distinct path of travel;
3. Access to program and services themselves;
4. Access to public areas and restrooms; and
5. Access to related amenities.

*A self-evaluation/assessment of each of the City's physical facilities has concluded that all facilities successfully meet ADA accessibility requirements.*

### **II. PROGRAMMATIC BARRIERS**

The City recognizes that not all barriers to the City's programs, services and activities are physical in nature. Other administrative barriers exist that must be overcome to provide complete government services to those who are disabled.

## **A. COMMUNICATIONS**

The City's Plan incorporates steps to ensure that communications with people with disabilities are as effective as communications with others. There are several types of communications that the City handles, including web site communications, communications relating to City administration and open public meetings, and other communications regarding the City's programs, services and activities. The City takes specific actions to improve communications, including the following:

1. **Agenda text.** The City prints certain portions of meeting agendas in large-font type so that the content of agendas of public meetings can be more easily reviewed.
2. **Web site communication.** The City posts agendas on the City's website, which when used with the free Adobe Acrobat Reader function, allows for enlargement so that the contents of agendas may be viewed from one's personal computer. The City also offers televised and video live stream of Council meetings. The City's official website offers Google translations and the ability to provide description of images. The City continues to seek software upgrades that ensure accessibility to the website for all.
3. **Participation in/accessibility to public meetings.** The City conducts all public meetings in ADA accessible facilities. To the extent feasible, the City will make specific accommodations to ensure that meetings among residents and City staff can be held within ADA accessible facilities.

## **B. ACCOMMODATION OF DISABLED PERSONS IN MUNICIPALLY SPONSORED PROGRAMS**

The City is committed to allowing persons with disabilities to participate in municipally sponsored programs. The City achieves this goal by integrating all of the steps outlined above into these programs, including ensuring meeting and events are, to the extent possible, held in ADA-accessible parks and facilities.

## **III. CONCLUSION/ACTION LOG**

The City continues to look for and timely remedy barriers to access in an effort to ensure that the disabled citizens of Smyrna are given access to the City's programs, services and activities.

The City has instituted an ADA Action Log, documenting its efforts to comply with the ADA. At a minimum, the Action Log identifies items that are not ADA compliant and will include anticipated completion dates. The ADA Action Log will be updated on an annual basis. The ADA Action Log shall be available upon request. (**APPENDIX A**)

**ADA GRIEVANCE POLICY**

This grievance policy provides for prompt and equitable resolution of complaints alleging any action prohibited by Title II of the Americans with Disabilities Act or Section 504 of the Rehabilitation Act. Complaints should be filed with the City’s ADA Coordinator at:

City of Smyrna  
Fire Dept/Fire Marshal  
ATTN: ADA Coordinator  
2800 King Street  
Smyrna, GA 30080  
adacoordinator@smyrnaga.gov  
770-678-5373

The City will strive to provide for the prompt and equitable resolution of complaints which allege that any action prohibited under the ADA rules involving a covered disability has taken place.

*Step 1* All ADA non-compliance complaints regarding alleged discrimination should be submitted (in writing, if possible) to the City’s ADA Coordinator within 180 days of the alleged act(s) of discrimination or of learning of the alleged act. A decision by the ADA Coordinator will be rendered within 15 working days.

*Step 2* If the complaint cannot be resolved to the satisfaction of the complainant by the ADA Coordinator, it will be forwarded to the City Administrator who will hear the complaint, request, and/or resolution desired. The City Administrator will issue a written decision within 30 days of notification.

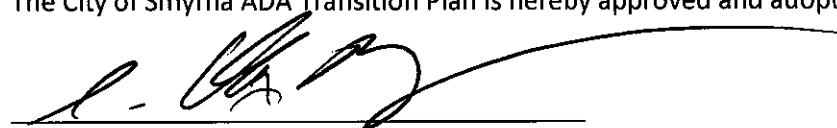
*Step 3* If the complaint cannot be resolved to the satisfaction of the complainant by the City Administrator, it will be forwarded to the Public Safety Committee of the City Council who will hear the complaint, request, and/or resolution desired. The Committee will make the final determination regarding accommodation.

The individual's right to prompt and equitable resolution of an ADA complaint shall not be impaired by his or her pursuit of other remedies, such as the filing of a complaint with the U. S. Department of Justice, the Equal Employment Opportunity Commission, or any other appropriate federal or state agency. **(APPENDIX B)**

**CITY ADA COORDINATOR**

The City ADA Coordinator shall coordinate the City’s efforts to comply with and carry out its responsibilities under Title II of the ADA, including any investigation of any complaint communicated to it alleging its noncompliance or alleging any actions that would be prohibited under the ADA. The City shall make available to all interested individuals the name, office address and telephone number of the employee so designated and shall adopt and publish procedures for the prompt and equitable resolution of complaints alleging any action that would be prohibited under the ADA.

The City of Smyrna ADA Transition Plan is hereby approved and adopted this day, July 15, 2013



A. Max Bacon, Mayor  
City of Smyrna



## APPENDIX A

### CITY OF SMYRNA AMERICANS WITH DISABILITIES ACT TRANSITION PLAN

#### ACTION LOG

#	Date	Location	ADA Issue / Action Needed	Status	Cost Estimate	Completion Date



## APPENDIX B

### CITY OF SMYRNA ADA Complaint Form

Title VI of the 1964 Civil Rights Act requires that "No person in the United States shall, on the grounds of race, color, national origin, sex, age or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance."

Note: The following information is necessary to assist us in processing your complaint. Should you require any assistance in completing this form, please let us know.

Complete and return this form to:

City of Smyrna Fire Dept/Fire Marshal, Attn: ADA Coordinator, 2800 King Street, Smyrna, GA 30080.

1. Complainant's Name \_\_\_\_\_
2. Address \_\_\_\_\_
3. City, State and Zip Code \_\_\_\_\_
4. Telephone Number (home) \_\_\_\_\_ (cell) \_\_\_\_\_
5. Person discriminated against (if someone other than the complainant)
  - a. Name \_\_\_\_\_
  - b. Address \_\_\_\_\_
  - c. City, State and Zip Code \_\_\_\_\_
6. Which of the following best describes the reason you believe the discrimination took place?  
Was it because of: (please check)

Race/Color	<input type="checkbox"/>	National Origin	<input type="checkbox"/>
Age	<input type="checkbox"/>	Disability	<input type="checkbox"/>
Sex	<input type="checkbox"/>		
7. What date did the alleged discrimination take place? \_\_\_\_\_

8. In your own words, describe the alleged discrimination. Explain what happened and whom you believe was responsible. Please use additional sheets if additional space is needed.

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9. Have you filed this complaint with any other federal, state or local agency, or with any federal or state court?       Yes       No

10. If yes, check all that apply:

- Federal Agency       Federal Court       State Agency  
 State Court       Local Agency

11. Please provide information about a contact person at the agency/court where the complaint was filed.

- a. Name \_\_\_\_\_  
b. Address \_\_\_\_\_  
c. City, State and Zip Code \_\_\_\_\_  
d. Telephone Number \_\_\_\_\_

Please sign below. You may attach any written materials or other information that you think is relevant to your complaint.

\_\_\_\_\_  
Complainant's Signature

\_\_\_\_\_  
Date