



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration
Behavioral Health

Clinic Services
Emergency Medical Services
Environmental Health/Animal Services

Public Health
Public Administrator/Public Guardian

Policy Number	150
Policy Title	Americans with Disabilities Act (ADA), Section 504, and Unruh Civil Rights Act; Compliance with SUD (SAPTBG)
References	Americans with Disability Act (ADA) of 1990, Section 504 of the Rehabilitation Act of 1973; 45 Code of Federal Regulations (CFR), Part 84, Non-discrimination on the Basis of Handicap in Programs or Activities Receiving Federal Financial Assistance; Title 24, California Code of Regulations (CCR), Part 2, Activities Receiving Federal Financial Assistance and; Unruh Civil Rights Act California Civil Code (CCC) Sections 51 through 51.3 and all applicable laws related to services and access to services for persons with disabilities (PWD). California Code of Regulations (CCR title 9 section 1810.253) Monterey County Health Department Policies Monterey County Behavioral Health Polices Title 42 Code of Federal Regulations (CFR) Part 438.68, as specified in Chapter 738, Statutes of 2017 (Assembly Bill 205) 42 C.F.R. §§ 438.350(a) and 438.320
Effective	March 8, 2018

1 **Policy**

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3 It is the policy of Monterey County Behavioral Health (MCBH) and its contractors to abide by all
4 provisions of the American with Disabilities Act (ADA) of 1990, section 504 of the Rehabilitation Act
5 of 1973. MCBH and its contactors will not discriminate against qualified individuals with disabilities
6 on the basis of disability in its services, programs, or activities and provide equal access and
7 effective communication to all clients and patients with disabilities. MCBH and its contractors will
8 make reasonable modifications to policies and programs to ensure that people with disabilities
9 have equal access to enjoy all of its services, programs, and activities (i.e. individuals with service
10 animals are welcomed in facilities, even where pets are generally prohibited.

11

12 Facilities licensed or certified by the Department of Health Care Services (DHCS) or any entity
13 receiving state or federal funding must comply with requirements and ensure access to Specialty
14 Mental Health Services (SMHS) and/or Substance Use Disorder (SUD) services.

15

16 MCBH and its Contracted providers are required to adhere with the requirements of the Americans
17 with Disabilities Act (ADA), Section 504, and the Unruh Civil Rights Act, ensuring that all SMHS
18 and SUD programs be accessible to people with disabilities to the fullest extent possible.

19

20 **Procedure:**

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22 At initial Medi-Cal site certification and at least once every three years thereafter for SMHS and
23 annually for SUD services, MCBH will conduct an assessment of programs to determine
24 compliance and adherence to ADA policy and access to care. MCBH shall use the modified
25 version of the Alcohol and Other Drug Program's Checklist for Accessibility: Exhibit 4 of ADP
26 Bulletin 09-05, issue date May 27, 2009.

27

28 Clients may contact the Patient Rights Advocate at (831) 755-4518 or toll free (866) 908-4375
29 TTY/TDD (831) 796-1788 or e-mail: 415-PatientAdvocate@co.monterey.ca.us. Clients may also
30 contact the Quality Improvement Department (831) 755-4545 for questions or complaints regarding
31 compliance with ADA requirements.

32

33 Additionally, clients may contact the *United States Department of Justice*, Civil Rights Division to
34 file an Americans with Disabilities Act complaint alleging disability discrimination against a State or
35 local government or a public accommodation (private business including, for example, a restaurant,
36 doctor's office, retail store, hotel, etc.). https://www.ada.gov/filing_complaint.htm.

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38 To file an ADA complaint online:

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English: <https://www.ada.gov/complaint/>

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Spanish: <https://www.ada.gov/complaint/?language=es>

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42 To file an ADA complaint by mail:

43

US Department of Justice

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950 Pennsylvania Avenue, NW

45

Civil Rights Division

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Disability Rights Section – 1425 NYAV

47

Washington, D.C. 20530

48

49 To file an ADA complaint by fax: (202) 307-1197

50



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Recipient of The California Endowment's 2017 Arnold X. Perkins Award for Outstanding Health Equity Practice

DATE: _____

PROGRAM NAME: _____

PROGRAM ADDRESS: _____

MEDI-CAL NPI #: _____ CalOMS #: _____

Accessible Approach/Entrance

A) PARKING WALKWAYS: MINIMUM CONSIDERATIONS.	YES	NO	N/A
1) If off-street parking is available, is it as close to the accessible entrance as possible? If yes: Number of total stalls Number of accessible stalls Number of van accessible stalls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Are walkways with necessary ramps and curb cuts available from the parking area to the accessible entrance? NOTE: The travel route should be at least 36" wide.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Are designated reserved parking spaces provided for persons with disabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B) ENTRANCES: MINIMUM CONSIDERATIONS.	YES	NO	N/A
1) Is at least one primary building entrance accessible at ground level or ramped with no steps? NOTE: Ramp slope should not exceed 1:12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Are accessible entrances identified with proper signage? (NOTE: A primary entrance is one that is a commonly used public entrance which does not involve transit through kitchens, storage facilities or similar areas.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Are accessible primary entrances left unlocked or are provisions made for a signaling device that is accessible if the entrance must be locked during certain hours for security purposes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Do entrance doors have a minimum clear opening of 32"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C) TOILET ROOMS & BATHING FACILITIES: MINIMUM CONSIDERATIONS	YES	NO	N/A
1) Does the facility have accessible public restrooms for men and women?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) Is there an accessible unisex restroom available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Does the restroom entrance door have a minimum unobstructed opening of 32"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) If stalls are provided, are they a minimum of 36" wide and 72" deep, or 48" wide and 57" deep, and have doors with a 30" unobstructed opening? (NOTE: A 32" clear opening is preferred.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Is the sink rim no higher than 34"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Is the toilet seat 17" to 19" high?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) Is there at least 29" from the floor to the bottom of the sink apron (excluding pipes)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7) Are exposed drain and hot water pipes insulated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8) Are other fixed objects located so as not to impede wheelchair access into stalls or other facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D) MEETING/HEARING ROOM FACILITIES: MINIMUM CONSIDERATIONS	YES	NO	N/A
1) Are there meeting rooms that can only be accessed by steps? (NOTE: If so identify those rooms)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) If amplifiers and /or sound equipment are used, are individual hand-held or lavalier microphones available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) Are provisions made for assistive listening devices upon request for persons with hearing impairments? (NOTE: Assistive listening systems are available for loan at no cost from the ADP funded-Disability Access Project.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Can meeting room seating be arranged to accommodate persons using wheelchairs in an integrative manner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Are print materials recorded for visually impaired persons?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Are interpreters available for persons with hearing impairments?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E) RESIDENTIAL FACILITIES ONLY: LODGING ACCOMMODATIONS: MINIMUM CONSIDERATIONS	YES	NO	N/A
1) What is the total number of sleeping rooms provided?			
2) How many sleeping rooms are accessible for people with mobility limitations?			
3) Do entrance doors to accessible guest rooms have a minimum clear opening of at least 32”?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Do accessible guest rooms allow sufficient turning space (5 ft. in diameter) to allow a person using a wheelchair to move about?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) If there is a phone in the room, is there an unobstructed approach to the phone for a person using a wheelchair?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

F) AUXILIARY AIDS: MINIMUM CONSIDERATIONS	YES	NO	N/A
1) Is there a written disability admission and referral policy in place? If yes, attach a copy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Does the facility have a TDD/TTY telephone device and number for the deaf or hard of hearing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) If no, has staff been trained to use the California Relay System (CRS)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Does the emergency alarm system have both visual and audible features?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) If the facility has a pay phone, is TTY access available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Is at least one public pay phone equipped with amplification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) Do televisions for client use have closed caption capability?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7) Are hearing interpreters available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8) Are hearing interpreters part of group counseling?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Nondiscrimination Questionnaire

	YES	NO	N/A
1. Is nondiscriminatory treatment, equally afforded to other individuals, given directly or through contractual licensing or other arrangements to people with disabilities in the full and equal enjoyment of the goods, facilities, privileges, advantages, or accommodations offered?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are the goods, services, facilities, privileges, advantages, or accommodations provided differently or separately to individuals with disabilities and individuals without disabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are the goods, services, facilities, privileges, advantages, and accommodations offered to individuals with disabilities in the most integrated setting appropriate to the needs of the specific individual in question?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. If separate or different programs or activities are provided to individuals with disabilities, may those individuals still participate in the activities that are not separate or different?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you use, directly and/or through a contractual or other arrangements, standards, criteria, or methods of administration that do not have the effect of discrimination by others?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are people with friends, associates, or relatives with a disability provided foods, services, facilities, privileges, advantages, accommodations, and other opportunities on a nondiscriminatory basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Do your eligibility criteria screen in, not out, individuals with disabilities (unless such criteria can be shown to be necessary for the provision of goods, services, etc., being offered)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are reasonable modifications made to policies, practices, or procedures when such modifications are necessary to offer goods or services, etc., to individuals with disabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Are people with disabilities included, allowed services, integrated, and otherwise treated the same as others through the provision of auxiliary aids and services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Are architectural and communication barriers that are structural in nature (including permanent, temporary, or moveable structures, such as furniture, equipment, and display racks) removed from existing facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Where removal of barriers is not "readily achievable" are the goods, services, etc., made available through alternative methods?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Has new construction been designed to be readily accessible to and usable by individuals with disabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. If you are altering a facility, have the alterations been made in such a manner that, to the maximum extent feasible, the altered portions of the facility are readily accessible to and usable by individuals with disabilities including individuals who use a wheelchair?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>