

504 SELF-EVALUATION SURVEY

CDBG/HUD RECIPIENT INFORMATION

CDBG/HUD RECIPIENT NAME Rutherford County

CDBG/HUD RECIPIENT ADDRESS_____

289 North Main Street
Rutherfordton NC 28139

NAME OF HR STAFF PERSON

RESPONSIBLE FOR SELF-EVALUATION SURVEY: Debra Conner

EMAIL: debra.conner@rutherfordcountync.gov

PHONE NUMBER: 828-287-6145

DATE SELF-EVALUATION WAS COMPLETED:_06-24-2019

CDBG GRANT NUMBER ____17-C-2988_____

SECTION 504 COMPLIANCE

SECTION 1. PROGRAM OUTREACH AND COMMUNICATION

For each question in this section circle either Yes or No. If a question does not apply to your HR, then write "N/A" next to the question and explain below. If your response to a question is No, then identify what modification to policies and practices will be undertaken or what corrective action will be taken to remedy any discrimination found. In some cases, a Yes answer will also require that additional information be supplied to complete the evaluation process.

NOTIFICATION

1. Has the HR taken steps to notify participants, applicants, employees, and unions or professional organizations that it does not discriminate on the basis of disability? **Yes** No

Yes – Briefly describe the methods used to notify the public about non-discrimination policies. Ads, Posters, Notices, website

No – Modification or corrective action:

2. Has the HR adopted special procedures to notify persons with disabilities, especially those with vision and hearing impairments? **Yes** No

Yes – Briefly describe the methods used to ensure program participation by those who have visual or hearing impairments. (Methods include, but are not limited to, qualified sign language and oral interpreters, readers, or the use of taped and Braille materials.)
Use the State TDD # 800-735-2962

No – Modification or corrective action:

PRINTED MATERIALS

1. Are written materials including posters with non-discrimination notices placed in physically accessible locations? **Yes** No
2. Can small print of posted announcements be read from a wheelchair? **Yes** No
3. Are all words in printed materials clearly legible? **Yes** No
4. Would color-blind individuals be able to distinguish all contents in printed materials?
Yes No
5. Are representations of disabled individuals free of patronizing stereotypes? **Yes** No

6. Do graphics in printed material permit easy reading of the contents? **Yes** No
7. Is all necessary program information included in printed material? **Yes** No
8. Are procedures for providing program access to disabled individuals stated clearly? **Yes**
No
9. Do all appropriate HR documents now include policy statements about non-discrimination on the basis of disabilities? **Yes** No
10. Are the Section 504 contact person's name, address, and phone number listed in printed material? **Yes** No

No to any question above – Modification or corrective action:

INFORMATION DISSEMINATION

1. Can copies of written materials be reasonably obtained by individuals with disabilities? **Yes** No
2. Have disability groups been included in the dissemination process? **Yes** No

N/A This will be handled by IPDC Staff

3. Does the HR use all available print and broadcast media to ensure that all individuals with disabilities receive appropriate notification? **Yes** No
4. Does the HR disseminate information to all agencies or organizations that deal with persons with disabilities in the HR service jurisdiction? **Yes** No N/a

This will be handled by IPDC Staff

5. Does all of the information disseminated by the HR include current non-discrimination policies? **Yes** No

No to any question above – Modification or corrective action:

COMMUNICATION

1. Has the HR taken appropriate steps to ensure effective communication with applicants, program participants, and members of the public by providing auxiliary aids where necessary so that individuals with disabilities (particularly persons with impaired vision or hearing) can have the opportunity to participate in, and enjoy the

benefits of HR programs and activities? **Yes** No **Large screens added to meeting rooms for vision impaired. Use TDD for hearing impaired**

No – Modification or corrective action:

2. Has the HR installed a telecommunications device (TDD) to communicate with hearing impaired and deaf persons? **Yes** **No**

No – Modification or corrective action: The County utilizes the State TDD

3. If the HR has a TDD, is the number listed in the commercial telephone or TDD directories? **Yes** **No** **N/A (HR does not have a TDD)**

No – Modification or corrective action:

4. Has the HR installed a reader, developed Braille materials, audio recordings or other similar services and devices for persons with impaired vision? **Yes** **No**

No – Modification or corrective action:

No request have been made at this time, however, the county will accommodate the needs of people with impaired vision.

SECTION 2. COMPLAINT PROCESSING PROCEDURES

For each question in this section circle either Yes or No. If a question does not apply to your HR, then write “N/A” next to the question and explain below. If your response to a question is No, then identify what modification to policies and practices will be undertaken or what corrective action will be taken to remedy any discrimination found. In some cases, a Yes answer will also require that additional information be supplied to complete the evaluation process.

1. Does the HR have a written policy for handling complaints of discrimination based on disability? **Yes** **No**

Yes – ATTACH a copy of the current HR policy which should include the date the policy was established, the date the policy was distributed to staff, and the citation for the policy. **POLICY ATTACHED**

No – Modification or corrective action:

2. Has the HR adopted procedures that incorporate due process standards and allow for prompt resolution of any complaints or alleged discrimination based on disabilities? **Yes** **No**

Yes – ATTACH a copy of your current grievance procedures and list the name of the person or unit responsible for receiving and processing complaints.

No – Modification or corrective action:

3. Has the HR notified staff and program participants about the grievance procedures?
Yes No

No – Modification or corrective action:

SECTION 3. ELIGIBILITY AND ADMISSION CRITERIA

For each question in this section circle either Yes or No. If a question does not apply to your HR, then write “N/A” next to the question and explain below. If your response to a question is No, then identify what modification to policies and practices will be undertaken or what corrective action will be taken to remedy any discrimination found. In some cases, a Yes answer will also require that additional information be supplied to complete the evaluation process.

1. Has the HR examined all policies pertaining to program eligibility and admission criteria to determine if they had the purpose or effect of excluding or limiting the participation of individuals with disabilities in HR programs and activities? Yes No
N/a

No – Modification or corrective action:

2. Has the HR, in examining its policies on program eligibility and admission criteria, paid particular attention to those incorporating or establishing: physical or mental fitness or performance requirements, safety standards, testing requirements, educational requirements, work experience requirements, income level requirements, credit rating requirements, requirements based on disability, requirements that prohibit participation because of disability, and insurability requirements? Yes No
N/A

No – Modification or corrective action:

3. Has the HR altered or eliminated policies that have the direct or indirect effect of excluding or limiting the participation of individuals with disabilities in HR programs and activities? Yes No **N/A** (explain below then skip to next section)

Yes- List any policies that have been altered or eliminated.

No – Modification or corrective action:

N/A – Explain (e.g. no such policies found in review): No such policies to eliminate

4. Has the HR communicated the policy changes to staff members and the public?
Yes No

No – Modification or corrective action:

SECTION 4. EMPLOYMENT POLICY AND PRACTICE

For each question in this section, circle either Yes or No. If a question does not apply to your HR, then write “N/A” next to the question and explain below. If your response to a question is No, then identify what modification to policies and practices will be undertaken or what corrective action will be taken to remedy any discrimination found. In some cases, a Yes answer will also require that additional information be supplied to complete the evaluation process.

REASONABLE ACCOMMODATION

1. Has the HR made a reasonable accommodation (an accommodation which does not impose an undue hardship on the HR operation) to the known physical or mental limitations of an otherwise qualified applicant with disabilities or employee with disabilities? **Yes** No N/A (explain below then skip to next section)

No – Modification or corrective action:

N/A – Explain (e.g. have not had disabled applicants or employees):

IMPORTANT INFORMATION

Reasonable accommodation would include making facilities used by employees accessible to and usable by individuals with disabilities, job restructuring, job relocation, part-time or modified work schedules, acquisition or modification of equipment and devices, the provision of readers or interpreters, and other similar actions.

2. In determining whether an accommodation imposed an undue hardship on the operation of the HR program, were the following factors considered?
- a) The overall size of the HR program with respect to the number of employees, number and type of facilities, and size of budget? **Yes** No
 - b) The type of the HR operation, including the composition and structure of the work force? **Yes** No
 - c) The nature and cost of the accommodation? **Yes** No

No to any question above - Modification or corrective action:

EMPLOYMENT CRITERIA

IMPORTANT INFORMATION

The HR may not deny any employment opportunity to a qualified handicapped or disabled employee or applicant if the basis for the denial is the need to make reasonable accommodation to the physical or mental limitations of the employee or applicant.

1. If the HR uses an employment test or other criteria for selection that screens out or tends to screen out individuals with disabilities, can the HR show that the test score or other selection criteria is job related? Yes No N/A (explain below then skip to Q3)

No – Modification or corrective action:

N/A – Explain (e.g. no such test/criteria used): No such testing/ criteria

2. Has the HR obtained information from the appropriate HUD official that demonstrates that alternative job-related tests or criteria that tend to screen out fewer individuals with disabilities are unavailable? Yes No

No – Modification or corrective action:

3. Does the HR administer tests which accurately reflect the applicant's or employee's job skills or aptitude rather than the applicant's or employee's impaired sensory, manual, or speaking skills (except where those skills are the factors that the test is designed to measure)? Yes No

N/a No such testing

No – Modification or corrective action:

PRE-EMPLOYMENT INQUIRIES

1. Is the HR aware that it cannot make a pre-employment inquiry or conduct a medical examination of an applicant to determine whether the individual is a person with disability unless the HR is undertaking affirmative action efforts or conditioning an offer of employment on the results of a medical examination given to all prospective employees in the same job category? **Yes** No

No – Modification or corrective action:

IMPORTANT INFORMATION

HR may make a pre-employment inquiry into an applicant's ability to perform job-related functions.
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2. When the HR is undertaking affirmative action efforts, voluntary or otherwise, and inviting applicants for employment to indicate whether and to what extent they are disabled, does the HR meet the following conditions:
 - a) State clearly either orally or in writing that the requested information is intended for the HR's affirmative action efforts? **Yes** No
 - b) State clearly that the information is being requested on a voluntary basis, that it will be kept confidential and that refusal to give the information will not subject the applicant or employee to any adverse treatment? **Yes** No

No to either question above - Modification or corrective action:

3. Has the HR informed job applicants that an employment offer may be conditioned on the results of a medical examination if all entering employees in a job category must take an examination regardless of disability, and the examination accurately reflects the employee's job skills? **Yes** No

No – Modification or corrective action:

4. Has the information obtained by the HR concerning the medical condition or history of job applicants been collected and maintained on separate forms and accorded confidentiality as medical records? **Yes** No

No – Modification or corrective action:

IMPORTANT INFORMATION

Supervisors and managers may be informed of restrictions on the work or duties of individuals with disabilities and informed of necessary accommodations; first aid and safety personnel may be informed if the medical condition might require emergency treatment; and Section 504 compliance officers can have access to relevant medical information upon request.

SECTION 5. PHYSICAL ACCESSIBILITY OF BUILDINGS AND FACILITIES

For each question in this section, circle either Yes or No. If a question does not apply to your HR, then write "N/A" next to the question and explain below. If your response to a question is No, then identify what modification to policies and practices will be undertaken or what corrective action will be taken to remedy any discrimination found. In some cases, a Yes answer will also require that additional information be supplied to complete the evaluation process.

REASONABLE ACCOMMODATION

1. Has the HR made a reasonable accommodation (any accommodation which does not place an undue financial and administrative burden on the HR) to the known physical and mental limitations of qualified persons with disabilities to allow access to facilities, programs, and services? **Yes** No

No – Modification or corrective action:

2. In determining whether an accommodation imposed an undue financial or administrative burden on the operation of the HR program, were the following factors considered:
 - a) The overall size of the HR's program with respect to the number of employees, number and type of facilities, and the size of budget? **Yes** No
 - b) The type of the HR operation, including the composition and structure of the workforce? **Yes** No
 - c) The nature and cost of the accommodation? **Yes** No

No to any question above – Modification or corrective action:

3. Has the HR identified the individual responsible for making the final decision about undue financial and administrative burdens? **Yes** No

Yes – Please identify the individual responsible for making the final decision:

County Manager Steve Garrison

No – Modification or corrective action:

4. Has the HR adopted a procedure for ensuring that decisions about undue financial and administrative burdens are made properly and quickly? Yes **No**

Yes – **ATTACH** a copy of the current HR policy, which should include the date the policy was established, the date the policy was distributed to staff, and the citation for the policy.

No – Modification or corrective action:

NON-HOUSING FACILITIES n/a This Section monitored by IPDC

1. Has the HR designed or constructed any new non-housing facilities since July 11, 1988? Yes **No**

No – Proceed to question 2.

Yes – Are these new HR non-housing facilities designed and constructed to be readily accessible to and usable by individuals with disabilities? Yes **No**

No – Modification or corrective action:

2. Has the HR otherwise altered any existing HR non-housing facilities or designed any alterations to existing HR non-housing facilities since July 11, 1988. Yes **No**

No – Proceed to question 3.

Yes – Have these alterations or designs for alterations to existing HR non-housing facilities, to the maximum extent feasible, been made so that the facilities are readily accessible to and usable by individuals with disabilities? Yes **No**

No – Modification or corrective action:

IMPORTANT INFORMATION

HUD recipients are not necessarily required to make each of its existing non-housing facilities accessible to and usable by individuals with disabilities. In the case of historic

preservation programs or activities, HR is not required to take any action that would result in a substantial impairment of significant historic features of a historic property. HR is not required to take any action that it can demonstrate would result in a fundamental alteration in the nature of its program or activity. HR is not required to take any action if the change would impose undue financial and administrative burdens. If the HR determines that making a facility accessible would result in significant or fundamental alterations or would cause undue financial or administrative burdens, the HR should use other methods of providing accessibility to ensure that individuals with disabilities receive program or activity benefits and services.

3. Does the HR operate each non-housing program or activity receiving federal financial assistance so that the program or activity, when viewed in its entirety, is readily accessible to and usable by individuals with disabilities? Yes No

No – Modification or corrective action:

4. Does the HR need to make structural changes to non-housing facilities to achieve program accessibility? Yes No

No – Proceed to question 5.

Yes - Has the HR developed a transition plan setting forth the steps necessary to complete such changes? Yes No

No – Modification or corrective action:

Yes – Does the transition plan include the following?

- a) Identification of the physical obstacles in the HR's non-housing facilities that limit accessibility to programs? Yes No
- b) Detailed description of the methods that will be used to make the facilities accessible? Yes No
- c) A schedule for taking the steps necessary to achieve compliance in making facilities accessible? Yes No
- d) A schedule for each year of the plan if the time period of the transition plan is longer than one year? Yes No
- e) The name of the official responsible for implementation of the plan? Yes No
- f) The name(s) of the persons or groups who assisted with the preparation of the plan? Yes No

No to any question above – Modification or corrective action:

5. Has the HR determined that making a non-housing facility accessible to individuals with disabilities would result in a fundamental alteration or would pose an undue financial or administrative burden? Yes No

No – Proceed to next section, Existing Housing Facilities and Programs.

Yes - Have other methods of providing accessibility been considered? Yes No

No – Modification or corrective action:

Yes – Please answer the following questions in the self evaluation.

Self Evaluation

1. Have services been reassigned to accessible facilities or accessible portions of facilities? Yes No
2. Have aides been assigned to beneficiaries? Yes No
3. Have home visits been conducted? Yes No
4. Has equipment been added or redesigned? Yes No
5. Have changes been made in management policies and procedures? Yes No
6. Have additional accessible facilities been acquired or constructed? Yes No
7. Have alterations to existing facilities on a selective basis been completed? Yes No
8. Have other methods been employed? Yes No

No to any question above – Modification or corrective action:

IMPORTANT INFORMATION

HR is not required to make structural changes in existing facilities where other methods are effective in achieving compliance for program accessibility in non-housing environments. In choosing among available methods for meeting the requirements, the HR shall give priority to those methods that offer programs and activities to qualified individuals with disabilities in the most integrated setting appropriate.

EXISTING HOUSING FACILITIES AND PROGRAMS

IMPORTANT INFORMATION

This section applies to the Rental Rehabilitation and Section 8 Moderate Rehabilitation Programs.

1. Has the HR made any substantial alterations to existing housing facilities since July 11, 1988 (that is, made to a facility with 15 or more units and costing an amount equal to 75 percent or more of the replacement cost of the completed facility?) Yes
No N/A (no existing housing facilities, skip to end)

Yes – Do the facilities with the substantial alterations meet the same accessibility requirements as those for new construction? Yes No

No – Modification or corrective action:

2. Has the HR made other alterations to dwelling units since July 11, 1988? Yes No

Yes – Have the altered units been made accessible to and usable by individuals with disabilities to the maximum extent feasible? Yes No

No – Modification or corrective action:

3. Has the HR made alterations of single elements or spaces of dwelling units which, when considered all together, amount to an alteration of the units since July 11, 1988?
Yes No

Yes – In these units have the entire dwelling units been made accessible? Yes No

No – Modification or corrective action:

IMPORTANT INFORMATION

HUD recipients should operate each existing housing program receiving federal financial assistance so that when viewed in its entirety, the program is readily accessible to and usable by persons with disabilities. HUD recipients are not necessarily required to make each of its existing facilities accessible. HR is not required to take any action if the change would impose undue financial and administrative burdens. If the HR determines that making a program accessible would result in significant or fundamental alterations or would cause undue financial or administrative burdens, the HR should use other methods of providing accessibility to ensure that individuals with disabilities receive program or activity benefits and services.

4. Are a minimum of five percent of the dwelling units altered since July 11, 1988 (or more based on a higher need prescribed by HUD) readily accessible to individuals with mobility impairments? Yes No

No – Modification or corrective action:

5. Have alterations to common areas or parts of existing facilities been made (since July 11, 1988) to the maximum extent feasible, so that the areas are accessible to and usable by individuals with disabilities? Yes No

No – Modification or corrective action:

6. Has the HR determined that making an existing facility accessible to individuals with disabilities would result in a fundamental alteration or would pose undue financial or administrative burdens? Yes No

Yes – Have the following options been considered:

- a) Have services been reassigned to accessible facilities or accessible portions thereof? Yes No
- b) Have aides been assigned to beneficiaries? Yes No
- c) Have home visits been conducted? Yes No
- d) Has equipment been added or redesigned? Yes No
- e) Have changes been made in management policies and procedures? Yes No
- f) Have additional accessible facilities been acquired or constructed? Yes No
- g) Have alterations to existing facilities on a selective basis been completed? Yes No
- h) Have other methods been employed? Yes No

No to any question above – Modification or corrective action:

<p style="text-align: center;">IMPORTANT INFORMATION</p> <p>HR is not required to make structural changes in existing facilities where other methods are effective in achieving compliance for program accessibility in housing</p>
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environments or to provide supportive services that are not part of the program. In choosing among available methods for meeting the requirements, the HR shall give priority to those methods that offer programs and activities to qualified individuals with disabilities in the most integrated setting appropriate.

-----**END**-----

- **Be sure to attach grievance procedure and current HR policy.**
- **Be sure CDBG grant number is written on cover sheet.**

U. S. Department of Justice
Civil Rights Division
Coordination and Review Section

TECHNICAL ASSISTANCE GUIDE

SUPPLEMENTAL INFORMATION ABOUT THE SECTION 504 TRANSITION PLAN REQUIREMENTS

TAG-88-11