



City of Fife ADA Transition Plan Grievance Procedure

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BACKGROUND

The City is required to adopt and publish grievance procedures providing for prompt and equitable resolution of complaints alleging any action that would be prohibited by the ADA.

The grievance procedure should include¹:

- a description of how and where a complaint under Title II may be filed with the City;
- if a written complaint is required, a statement notifying potential complainants that alternative means of filing will be available to people with disabilities who require such an alternative;
- a description of the time frames and processes to be followed by the complainant and the City;
- information on how to appeal an adverse decision; and
- a statement of how long complaint files will be retained.

The City currently has no adopted procedure. The following creates a policy and procedure.

POLICY ON COMPLAINTS

Input, concerns or requests for accommodation may be provided to the City of Fife by accessing the City of Fife web site at www.cityoffife.org, clicking on “ADA Coordinator” in the drop down menu near the top of the page, clicking on the link “Contact Us” and filling out and submitting the electronic form provided. The information will then be forwarded to the appropriate City office. Public requests made through this procedure will be reviewed and the facility in question will be considered for a higher priority for improvement. Priorities may change based upon citizen requests, additional input and changing conditions. Results of this process will be communicated directly to the individual by phone or e-mail. Individuals are encouraged to call the responsible City office directly.

The City of Fife also has a formal grievance or complaint procedure which may be used if the issue has not been resolved by using the above procedure. A copy of this grievance form is included in the appendix. A copy of the grievance form may also be obtained at the City of Fife’s ADA Coordinator or Human Resource office.

Complaints may be filed by any person who believes that he or she has been excluded from participation in, been denied the benefits of, or otherwise subjected to discrimination under any the City of Fife service, program or activity, and believes the discrimination is based upon disability.

Any individual, groups of individuals or entity that believes they have been discriminated against on the basis of disability or faced unaccommodated barriers to access as defined by the

¹ <http://nwadacenter.org/toolkit/grievance-procedure>

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ADAAA may file a complaint. The complaint must be in writing and contain the following information: 1) Name; 2) Address; 3) Phone number of complainant; 4) Location, date; and 5) Description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint will be made available for persons with disabilities upon request.

Exhibit A

City of Fife Grievance Procedure – September ##, 2019

This Grievance Procedure is established to meet the requirements of the Americans with Disabilities Act of 1990 ("ADA"). It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, programs, or benefits by the City of Fife. The City's Personnel Policy governs employment-related complaints of disability discrimination.

1. The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint, will be made available for persons with disabilities upon request.
 2. The complaint should be submitted by the grievant and/or [his/her] designee as soon as possible but no later than 60 calendar days after the alleged violation to:

(Name)
ADA Coordinator
Name@CityOfFife.Org
5411 23rd Street E
Fife, WA 98424
 3. Within 15 calendar days after receipt of the complaint, Mr. (Name) or his designee will meet with the complainant to discuss the complaint and the possible resolutions. Within 15 calendar days of the meeting, Mr. (Name) or his designee will respond in writing, and where appropriate, in a format accessible to the complainant, such as large print, Braille, or audio tape. The response will explain the position of the City of Fife and offer options for substantive resolution of the complaint.
 4. If the response by Mr. (Name) or his designee does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision within 15 calendar days after receipt of the response to the City Hearings Examiner or their designee.
 5. Within 15 calendar days after receipt of the appeal, the City Hearings Examiner or their designee will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days after the meeting, the City Hearings Examiner or their designee will respond in writing, and, where appropriate, in a format accessible to the complainant, with a final resolution of the complaint.
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6. All written complaints received by Mr. (Name) or his designee, appeals to the City Hearings Examiner or their designee, and responses from these two offices will be retained by the City of Fife for at least three years in their respective offices.
7. The right of a person to a prompt and equitable resolution of the complaint filed hereunder shall not be impaired by the person's pursuit of other remedies such as the filing of an ADA complaint with the responsible federal department or agency. Use of this grievance procedure does not affect nor does it prevent the pursuit of other remedies.
8. These rules shall be construed to protect the substantive rights of interested persons, to meet appropriate due process standards, and to assure that the City of Fife complies with the ADA and implementing regulations.

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APPENDIX - ADA GRIEVANCE FORM
COMPLAINT OF ACCESS VIOLATION OR DISCRIMINATION
ON THE BASIS OF DISABILITY

The City of Fife will make every reasonable effort to ensure that confidentiality is maintained throughout the complaint and investigation process, to the extent consistent with the law, adequate investigation, and appropriate corrective action. This means that the City will share any sensitive information you provide here only on a need-to-know basis.

Individual identifying access violation or discrimination

Name _____

Address _____

Telephone _____

Authorized representative of individual above (if any)

Name _____

Address _____

Telephone _____

1. Please describe the City of Fife's alleged violation of access requirements, or discriminatory action, in enough detail so that the nature of your grievance can be clearly understood. Add additional pages if necessary:

2. Please give the date(s), time(s) and location(s) of the incident(s) or observation(s) you are reporting:

3. If the incident involves a City of Fife employee(s) please provide his or her name(s), if known:



4. If the grievance involves physical access to a City of Fife public facility, land, or right-of-way, please provide the specific address(s) of those locations, if known:

5. Please give the name(s) and address(es), if known, of any witnesses to the access violation or alleged discrimination:

6. If this complaint is filed on behalf of a second person, or on behalf of a group of people, please provide the names and addresses of all of the grievants, if possible:

7. What action do you want taken to correct the alleged access violation or discrimination?

8. Is there any other information you want the City to know concerning your grievance?

Signature: _____

Date: _____

Signature of (check one)

- Observer of alleged access violation?
- Victim of alleged discrimination?
- Authorized representative?

Submit this form to the appropriate department head, or to the City ADA Coordinator.



RESOLUTION NO. _____

A RESOLUTION designating an ADA Coordinator and adopting a grievance procedure for compliance with the Americans with Disabilities Act of 1990.

WHEREAS, the Americans with Disabilities Act (ADA) was signed into law on July 26, 1990, and applies to the City of Fife; and

WHEREAS, this law prohibits discrimination against persons with disabilities and requires that a qualified individual with a disability should not be subject to discrimination in employment, access to public facilities, services, programs and activities; and

WHEREAS, appropriate procedures are required under the ADA, therefore,

BE IT RESOLVED by the City Council of the City of Fife:

That the City Manager shall designate an ADA Coordinator, whose duties shall include the provision of proper notice of the ADA grievance procedure to City personnel and the community at large, and the receipt and review of any ADA grievance directed to the City of Fife.

BE IT FURTHER RESOLVED that the ADA Grievance Procedure dated September ##, 2019, attached hereto as Exhibit "A" is hereby adopted.

PASSED by the City Council of the City of Fife this ____ day of _____, 2019.

Council Chair

APPROVED this ____ day of _____, 2019.

City Manager

ATTEST:

Clerk
