



we care

P.O. Box 16

Morton, IL 61550-0016

www.wecareofmorton.com

Providing Community Services Since 1975

Community Services

309.263.1015

Transportation

309.263.7708

Fax

309.263.4011

WE CARE INC.

ADA POLICY

Purpose

We Care Inc. (WCI) provides safe and efficient transportation to the communities we serve. WCI provides door-to-door service to the general public, and for the frail, elderly, and persons with disabilities. Door-to-door means that drivers assist clients from their homes and assist them back to the door in a safe and polite manner. All able bodied passengers are given curb-to-curb service, meaning they are picked up in front of their homes and delivered in front of their destinations.

Training

WCI provides training to vehicle operators, including training for the safe operation of the vehicles, adaptive equipment, and proper treatment of the frail, elderly, persons with disabilities, and the ADA regulations.

Maintenance

All bus operators must include in their pre-trip inspection a check of all lift, ramps, interlocks, inside and outside step lighting, wheelchair securement devices, and radio equipment. Any equipment not operating properly must be reported to the dispatcher immediately. If a spare vehicle is available, the vehicle will be immediately removed from service until the problem is corrected. If a spare vehicle is not available, the vehicle can be used to pick up passengers that don't need the use of the lift. The vehicle will be repaired within 5 days.

Each operator will understand how to operate the lift manually so that if the need arises, the operator will be prepared to accommodate the passenger. Bus operators will call all malfunctions of equipment to dispatch so the vehicle can be replaced.

In the event that a lift cannot be manually operated while on route to accommodate a passenger, the operator will call dispatch for assistance, and

the vehicle will be replaced if one is available. Dispatch will then accommodate the passenger by sending out another bus to pick them up.

Lift and Securement Use

All bus operators will be trained in the use of all lift and securement equipment.

If a passenger using a mobility device cannot be secured by the securement system, the operator must still transport the passenger. Dispatch must be notified of such an occurrence.

WCI will transport any type of mobility device and occupant that the lift and vehicle can physically accommodate, unless doing so is inconsistent with legitimate safety requirements. Segways, when used by a person with a disability, as a mobility device, is part of the broad class of mobility aids CFR 49 Part 37 intends will be accommodated. In this way, a Segway occupies a legal position analogous to canes, walkers, etc.

Under ADA law, passengers using wheelchairs cannot be required to use a seat belt unless it is also required of all other passengers. Illinois State law requires that seat belts be used by all passengers and the driver. WCI strongly encourages all passengers to abide by that law.

WCI is not required to permit wheelchair users to ride in places other than the designated securement places in the vehicle. WCI may require that a wheelchair user permit his/her wheelchair to be secured and must use securement systems to ensure that the user's chair remains in the securement area.

Where necessary or upon request, operators are required to assist an individual with a disability with the use of the securement system, and lift. Operators must leave their seats to assist passengers. The seats must be lifted to make the securement area available.

Passengers using wheelchairs cannot be required to transfer to a regular seat, but can be advised that this is allowable.

Passengers using wheelchairs are encouraged to ride the lift facing outward, away from the vehicle, but cannot be refused if they wish to face inward.

Operators must permit individuals, including standees, to use the lift to board or disembark the vehicle.

The only refusal to a passenger to use the lift shall be if the lift cannot be safely deployed at the location.

Other Service requirements

Bus operators may not require an individual with a disability to use designated priority seats, but if the priority seat is occupied by a non-elderly, or a non-disabled passenger, the operator may request that a seat be vacated for an elderly or disabled passenger.

Passengers with disabilities will be allowed to travel with a respirator or portable oxygen supply. The oxygen or respirator tank must be secured while on board the vehicle.

Passengers with disabilities will be allowed adequate time to complete boarding or alighting the vehicle. Operators are required to offer and assist passengers as needed or requested.

Service animals are allowed on vehicles. A service animal is any animal described as any guide dog, signal dog, or other animal individually trained to provide assistance to an individual with a disability. Service animals are allowed on the bus without muzzles. Operators may ask the person who has the animal, what service it has been trained for. Operators may not insist on proof that the animal is a service animal. A service animal may be excluded from riding if the animal's behavior poses a direct threat to the health or safety of others. The animal must show aggressive behavior, not just because it barks.

Personal Care Attendants

Disabled passengers are allowed one PCA to ride with them at no charge. A PCA is someone designated or employed specifically to help the eligible individual to meet his/her personal needs.

Companion Riders

Companion riders may accompany riders. Companion riders must pay the appropriate fare. If someone does not indicate use of a PCA, then any individual accompanying him/her will be regarded simply as a companion.

Entering a person's home or private residence

Drivers are prohibited from entering the passenger's home or private residence under normal circumstances. The only time it is allowed is if a medical emergency would require them to do so. Likewise, drivers are prohibited from taking passengers past the front door of their destination, such as a Doctor's office or other type of building.

Observing Privacy Rights

No personal identification information such as social security numbers, or D.O.B. will be disclosed, unless mandated by law.

Any other information obtained that might assist in safely transporting WCI passengers may be shared with anyone that can be of benefit to achieving those ends.

WCI will take reasonable technical and organizational precautions to prevent the loss, misuse, or alteration, of all personal information.

Cancellations/No shows

If the bus is dispatched to pick up a passenger and a passenger is a no show, or does not ride, but has failed to notify the office to cancel their ride, the passenger or agency is required to pay for the trip. The regulations permit transit providers to suspend Para transit service to those persons who establish a "pattern or practice" of missing scheduled rides. Service can be suspended for a "reasonable period of time". Allowances must be made for missed trips that are beyond the control of the individual. Before service can be suspended for cause under this provision, individuals must be provided with an opportunity to appeal the proposed suspension.

Disruptive Passengers/ Suspension of Service

WCI requires all passengers to be courteous and considerate of other passengers and the driver. Instructions from the driver are to be followed by all passengers. Behavior that may affect the safety of other passengers, drivers, or others will not be tolerated. A case by case ruling will decide the

continuation of carriage of such persons or groups and may require the presence of one or more PCAs to be provided by the family/residential, social welfare/health care agency as appropriate.

Inappropriate behavior will result in the passenger being suspended from riding WCI vehicles until the situation has been rectified.

Inappropriate behavior includes, but is not limited to, eating, drinking, use of tobacco products, foul language, disruptive behavior, and harassment of other passengers or the driver, horseplay, fighting, carrying of weapons, possession of illegal drugs, or having open containers of alcohol on the vehicle. Transportation of any hazardous substance (acids, gasoline, etc.) is prohibited. WCI reserves the right to refuse service to any individual violating these procedures.

Conduct which is related to a person's disability and which simply annoys or offends is not considered to be grounds to refuse service.

Suspension Appeals

A passenger appealing a suspension of services decision must state, in writing, the reasons why he/she disagrees with the supervisor's decision within 15 days of the suspension. The Executive Director, or Board of Directors shall reply, in writing, to the passenger within 30 days of the date the written appeal is received.

Illinois Relay Service

The Illinois Relay Service makes it possible for those who have difficulty understanding or being understood on the telephone communicate fully each time they make or receive a call.

To use the Illinois Relay Service, one person uses a TTY (teletypewriter) or a computer to communicate via the phone. TTY's vary, but most have screens that allows users to read what is said, and keyboards to type a response. They are typically used by people with speech that is difficult to distinguish over the phone, and by the hearing impaired.

The Illinois Relay Service provides a link called a Communications Assistant (CA) whose basis function is to voice exactly what the TTY user types. When the standard telephone user responds, the CA types everything that he or she hears.

The system is open 24 hours a day and is free of charge.

TTY Dial 1-800-526-0844
Voice User Dial 1-800-526-0857

Test Telephone (TTYs) can be obtained at no charge by qualified Illinois residents from the Illinois Telecommunications Access Corp. (ITAC). For more information contact:

ITAC
907 Clocktower Drive
Suite B
Springfield IL 62704
Accessible Formats

Copies of We Care Inc.'s brochures are available in large print, and computer disc, upon request.

We Care Inc. can be contacted at:

Phone - (309) 263-7708
Fax - (309) 263-4011
Mail - P.O. Box 16
Morton IL 61550

If you feel you believe you have been discriminated against contact:

Executive Director

We Care, Inc. or
PO Box 16
Morton IL 61550-0016
Telephone: 309-263-1015

Illinois State's Attorney
500 South Second Street
Springfield Illinois 62701
Telephone : 800-243-0618

Model Reasonable Modification Policy for Transit Systems

1. Policy

We Care, Inc. of Morton is committed to providing equal access and opportunity to qualified individuals with disabilities in all programs, services and activities. We Care, Inc. of Morton recognizes that in order to have equally effective opportunities and benefits, individuals with disabilities may need reasonable modification to policies and procedures. We Care, Inc. of Morton will adhere to all applicable federal and state laws, regulations and guidelines with respect to providing reasonable modifications, as necessary, to afford equal access to programs for persons with disabilities. We Care, Inc. of Morton does not discriminate on the basis of disability in admission to, participation in, or receipt of services and benefits under any program or activity. We Care, Inc. of Morton will take appropriate steps to ensure that persons with disabilities, including persons who have hearing, vision or speech impairments, have an equal opportunity to participate.

No qualified individual with a disability shall, by reason of such disability, be excluded from participation in or be denied the benefits of the transit services, programs, or activities of We Care, Inc. of Morton, or be subject to discrimination by We Care, Inc. of Morton. Nor shall We Care, Inc. of Morton exclude or deny equal services, programs, or activities to an individual because of the known disability of an individual with whom the individual is known to have a relationship or association.

The purpose of the reasonable modification policy is to offer equal and effective opportunities and access to public transportation services for persons with disabilities and full compliance with the provisions of the American with Disabilities Act of 1990, Title II, and Section 504 of the Rehabilitation Act of 1973.

2. Reasonable Modifications

We Care, Inc. of Morton will make reasonable modifications to policies, practices, and procedures when necessary to provide equal opportunity to qualified individuals with disabilities, unless making the modification would fundamentally alter the nature of the program, service, or activity. A reasonable modification is a change or exception to a policy, practice, or procedure that allows disabled individuals to have equal access to programs, services, and activities.

3. Eligibility Criteria and Safety Requirements

An individual is eligible to be considered to receive a reasonable accommodation if that individual has a disability in the form of a physical or mental impairment that limits the performance of one or more major life activities, has a record of impairment, or is regarded as having such impairment.

4. Requests for Reasonable Modifications

A request for a reasonable accommodation is a statement that an individual needs an adjustment or change at work, in the application process, or in a benefit or privilege of employment for a reason related to a physical or mental impairment. Requests for accommodation may be made either orally or in writing. The reasonable accommodation process begins as soon as the request for accommodation is made.

5. Interactive Process

When a request for accommodation is made, We Care, Inc. of Morton and the individual requesting an accommodation must engage in a good faith interactive process to determine what, if any accommodation shall be provided. The individual and the We Care, Inc. of Morton must communicate with each other about the request, the process for determining whether an accommodation will be provided, and the potential accommodations. Communication is a priority throughout the entire process.

6. Time Frame for Processing Requests and Providing Reasonable Modification

We Care, Inc. of Morton will process requests for reasonable accommodation as previously set forth and then provide accommodations, where appropriate, in as short a time frame as reasonably possible. We Care, Inc. of Morton recognizes, however, that the time necessary to process a request will depend on the nature of the accommodation(s) requested and whether it is necessary to obtain supporting information.

7. Granting a Reasonable Modification Request

As soon as We Care, Inc. of Morton determines that a reasonable accommodation will be provided, that decision should be immediately communicated to the individual. If the accommodation cannot be provided immediately, We Care, Inc. of Morton will communicate this fact to the requesting individual. This notice must be in writing in order to maintain the required information for reporting purposes.

8. Denying a Reasonable Modification Request

As soon as We Care, Inc. of Morton determines that a request for reasonable accommodation will be denied, We Care, Inc. of Morton will complete a denial of request form. The explanation for the denial shall clearly state the specific reasons for the denial.

9. Complaint Process and Resolution

We Care, Inc. of Morton shall have a uniform complaint and appeals procedure in place for individuals who believe their reasonable modification request was wrongfully denied. It is imperative to utilize the same complaint and appeals procedure for all individuals, and for this process to be documented.

10. Distribution Policy

We Care, Inc. of Morton will post this policy in a conspicuous place frequented by passengers (e.g., the system website) to ensure maximum opportunity for review. The postings shall list the name and telephone number of the person responsible for addressing requests for reasonable accommodation. Upon request, the information contained on the notice must be made available in alternate formats (e.g. Braille, audio, large print, etc.).

11. Record Retention

We Care, Inc. of Morton will maintain all records related to reasonable modification requests and denials for at least three (3) years.

12. Adoption

This policy, being duly adopted by the We Care, Inc. of Morton Board of Directors on November 21, 2017, hereby represents the policy of We Care, Inc. of Morton.

Signature of Authorized Official

Date

Complaint Form

Section I

Name:

Address:

Telephone: () -

Accessible Format requirements? (Circle)

Large
Print

TDD

Audio
Tape

Other:

Section II

Are you filing this complaint on your own behalf?

Yes *

No

* If yes go to Section III

Name & Relationship of the person for whom you are filing the complaint:

Please explain why you have filed for a third party:

You do or do not have permission from the aggrieved third party to file complaint.

Section III

I believe the discrimination I experienced was based on (check all that apply):

☐ Race

☐ Color

☐ National Origin

☒ Disability

Date of Alleged Discrimination (Month, Day, Year):

Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form.

Section IV

Have you previously filed a complaint with _____ County? Yes

Section V

Have you filed this complaint with any other Federal, State or local agency, or with any Federal or State court?

☐ Yes ☐ No

If yes, check all that apply:

☐ Federal Agency: _____

☐ Federal Court: _____

☐ State Court: _____

☐ State Agency: _____

☐ Local Agency: _____

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

Name: _____

Title: _____

Agency/Court: _____

Telephone: _____

Printed name: _____

Signature: _____

Date: _____

Form must be signed and dated

Include additional information here (or attach additional sheet, as needed, indicate below)

Check here if an additional sheet is attached _____

FOR OFFICE USE ONLY

Received by: _____

Date: _____

Please submit this form in person or mail to:

Illinois State's Attorney
500 South Second Street
Springfield IL 62701
Phone : 1-800-243-0618