

TCRC, Inc. DBA We Care ADA Transportation Policy

Purpose

It is the goal of the TCRC, Inc. DBA We Care (hereinafter referred to as We Care), through its public transit services, to design, implement, and maintain a safe, efficient, effective, and accessible transportation system for persons with disabilities. We Care works to ensure nondiscriminatory transportation to enhance the social and economic quality of life for all people of the communities served by We Care.

Policy

It is the policy of We Care to abide by all provisions of the Americans With Disabilities Act (ADA) of 1990, as amended, and US Department of Transportation (DOT) regulations found at 49 CFR Parts 27, 37, and 38, as amended, in the delivery of transit services that are open to the public and prohibits discrimination on the basis of disability and sets specific requirements that transit agencies must follow.

Wheelchair Definition

For the purposes of this policy a wheelchair is defined as a three-or-more wheeled mobility aid device, usable indoors, designed for and used by individuals with mobility impairments, whether operated manually or powered. With respect to the size and weight of wheelchairs, We Care will transport a wheelchair and its user, as long as the lift can accommodate the size and weight of the passenger and the wheelchair, and there is space for the wheelchair on the vehicle. However, We Care is not required to carry a wheelchair if the lift or vehicle is unable to accommodate the wheelchair and its user, consistent with legitimate safety requirements according to the lift manufactures.

Transportation of Persons with Disabilities

We Care is committed to ensuring safe, efficient, effective and accessible transportation for persons with disabilities, as provided by the ADA and related DOT regulations (both as amended) and will abide by the following:

- We Care vehicles will be lift equipped and have securement systems for wheelchairs.
- We Care requires wheelchair users to have their wheelchairs secured. Service will not be denied due to We Care's inability to secure a wheelchair. Securement problems of wheelchair shall be reported immediately to Administration of We Care.
- We Care does not require a wheelchair user to transfer to another seat.
- We Care staff will provide assistance upon request or as necessary with lifts, ramps, and securement systems.
- Persons with disabilities who do not use wheelchairs will be permitted to use the vehicle lifts or ramps if they are not able to safely use the steps of the vehicle. The person will temporarily sit in a wheelchair while using the lift or ramp. No persons will be allowed to use the lift while standing.

- We Care will permit service animals, such as, but not necessarily limited to, service dogs, that have been individually trained to work or perform tasks to accompany persons with disabilities in vehicles and facilities. The service animal must remain under the control of the rider and not present an immediate danger to the driver or other riders.
- We Care vehicle operators and other personnel of the system will make use of required accessibility related equipment and features (example: tie-downs will be used to secure a wheelchair on the vehicle).
- We Care will provide service to persons using respirators or portable oxygen. Vehicle operators will properly secure this equipment.
- We Care will ensure adequate time for persons with disabilities to board and disembark a system vehicle.
- We Care will provide training to Vehicle Operators and Dispatchers about the safe operation of vehicles and accessibility equipment and customer service sensitivity of persons with disabilities.
- We Care vehicle operators will check operation of lifts/ramps and inspect all securement equipment through pre-trip and post-trip inspection procedures on a daily basis. All ADA equipment failures will be reported immediately to the Administration of We Care.
- We Care will make service information available in accessible formats as requested.
- We Care may refuse service and/or contact local police for instances when a passenger engages in violence, is a danger to others, is seriously disruptive, or is engaged in illegal activities.

Reasonable Modification to Policies, Practices, and Procedures

We Care is committed to providing equal access and opportunity to qualified individuals with disabilities in all programs, services and activities. To ensure equality and fairness, We Care is committed to making reasonable modifications to its policies, practices, and procedures to avoid discrimination and ensure programs and services are accessible to individuals with disabilities. For more information on reasonable modification procedures of We Care including requesting a reasonable modification or the appeal process, please see We Care's Reasonable Modification Policy.

Refusal of Service and Nondiscrimination

We Care can refuse to provide service to an individual with disabilities if that individual engages in violent, seriously disruptive, or illegal conduct, and/or represents a direct threat to the health or safety of others. We Care, however, will not refuse to provide service to an individual with a disability solely because the individual's disability results in an appearance or behavior that may offend, annoy, or inconvenience We Care staff/employees or other persons.

ADA Service Requirements

We Care is responsible for ensuring all maintenance of all accessible features on agency vehicles including lifts, ramps, securement devices, elevators, signage and systems to facilitate communication.

The lift maintenance service was modeled after recommendations from the manufacturer. To ensure timely ADA equipment maintenance, standardized procedures, and better tracking records, all ADA service equipment will be serviced during every vehicle oil change at the main facility. Vehicles housed

at a satellite location shall follow schedule recommendations of the manufacturer. Vehicle interlocks shall be inspected on daily pre-trip and post-trip inspections and during monthly inspections. Vehicles with malfunctioning interlocks shall be taken out of service immediately until repaired.

ADA Complaint Procedures

We Care is committed to ensuring safe and efficient transportation for persons with disabilities, as provided by the Americans with Disability Act (ADA). Any ADA transportation service complaints received by We Care will be immediately investigated and every effort made to seek an appropriate and prompt resolution. By promptly identifying deficiency areas, We Care will work to make the necessary corrections and/or adjustments to alleviate the situation.

ADA Transportation service complaints shall be submitted in writing on the agency's complaint form and returned to the:

ADA Officer – Human Resources
TCRC, Inc., DBA We Care
33 S. 4th St.
Pekin, IL 61554

If you would like a copy of this form, or require additional information, please visit We Care's website at www.wecareofmorton.com or call the TCRC, Inc., DBA We Care ADA Officer – Human Resources during regular administrative business hours (8:00 am – 4:00 pm) at (309) 347-7148.

TCRC, Inc. DBA We Care ADA Complaint Procedures and Form

Policy and Procedures:

TCRC, Inc. DBA We Care, (hereinafter referred to as We Care) is committed to providing equal access and opportunity to qualified individuals with disabilities in all programs, services and activities, as provided by the Americans with Disability Act (ADA).

ADA transportation service complaints received by We Care will be investigated immediately with every effort made to seek an appropriate and prompt resolution. By promptly identifying deficiency areas, We Care will work to make the necessary corrections or adjustments to alleviate the situation.

ADA Transportation service complaints may be submitted in writing on the agency's Combined ADA and Title VI Complaint Form and returned to:

ADA Officer – Human Resources
TCRC, Inc., DBA We Care
33 S. 4th St.
Pekin, IL 61554
(309) 347-7148

Please see the form included or visit our website at www.wecareomorton.com.

If assistance is required in completing this form, including if you are unable to submit the complaint in writing, please contact the:

ADA Officer – Human Resources
(309) 347-7148

The Complainant will be informed in writing of the findings of the investigation, including any corrective actions taken. If the complainant is dissatisfied with the outcome of the investigation, please contact the Human Resources ADA officer. An appeal will be heard by separate personnel than those who made the original decision.

The investigative officer shall maintain a log of ADA complaints received from this process. This log will include:

- The date the complaint was filed
- A summary of the allegations
- The status of the complaint, and
- Actions taken by We Care in response to the complaint

Should We Care receive an ADA complaint in the form of a formal charge or lawsuit, the agency's attorney shall be responsible for the investigation.

Combined Complaint Form for ADA and Title VI
TCRC, Inc., DBA We Care

| | | |
|---|--------------------------------------|--|
| Section I: | | |
| Name: | | |
| Address: | | |
| Telephone (Home): | Telephone (Work): | |
| Electronic Mail Address: | | |
| Accessible Format Requirements? | <input type="checkbox"/> Large Print | <input type="checkbox"/> Audio Tape |
| | <input type="checkbox"/> TDD | <input type="checkbox"/> Other |
| Section II: | | |
| Are you filing this complaint on your own behalf? | <input type="checkbox"/> Yes* | <input type="checkbox"/> No |
| <i>*If you answered "yes" to this question, go to Section III.</i> | | |
| If not, please supply the name and relationship of the person for whom you are complaining. | | |
| Please explain why you have filed for a third party: | | |
| Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Section III: | | |
| I believe the discrimination I experienced was based on (check all that apply): | | |
| Title VI: | ADA: | |
| <input type="checkbox"/> Race | <input type="checkbox"/> Color | <input type="checkbox"/> National Origin |
| | | <input type="checkbox"/> 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 VI: | | |
| Have you previously filed a Discrimination Complaint with this agency? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If yes, please provide any reference information regarding your previous complaint.

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 Agency: _____

State Court: _____ Local Agency: _____

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

Name: _____

Title: _____

Agency: _____

Address: _____

Telephone: _____

Section VI:

Name of agency complaint is against: _____

Name of person complaint is against: _____

Title: _____

Location: _____

Telephone Number (if available): _____

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

Your signature and date are **required** below:

Signature

Date

Please submit this form in person at the address below, or mail this form to:

ADA/Title VI Officer – Human Resources
TCRC, Inc., DBA We Care
33 S. 4th St.
Pekin, IL 61554

For TCRC, Inc. DBA We Care Use Only

Date Received: _____ Received By: _____