



## REGION 10 DISABILITY ACCESS COMMITTEE

# Physical Accessibility Transition Plan

Date: March 1, 2018

Please direct all comments to Michael Littlejohn at [Michael.Littlejohn@iwd.iowa.gov](mailto:Michael.Littlejohn@iwd.iowa.gov) or call 515 281 3314

## Background:

- The State Workforce Development Board established a Disability Access Committee to lead a Statewide Disability Access Initiative to:
  - 1) Ensure that Iowa's one-stop delivery system meets all accessibility requirements for individuals with disabilities under the Iowa Civil Rights Act of 1965, as amended (ICRA); the Americans with Disabilities Act of 1990, as amended (ADA); and the Workforce Innovation and Opportunity Act (WIOA).
  - 2) Increase accessibility for individuals with disabilities to the programs, services, and activities of Iowa's one-stop delivery system.
  - 3) Continuously improve for individuals with disabilities the provision of services within the one-stop delivery system.
  - 4) Improve opportunities for individuals with disabilities in competitive integrated employment.
- The Disability Access Committee used the 2010 ADA Checklist for Existing Facilities (available online at [www.ADAchecklist.org](http://www.ADAchecklist.org)) to perform a physical accessibility assessment of the below facility, on the below date.

Date of Assessment:	June 29th, 2017
Facility Assessed:	4444 1st Ave NE Cedar Rapids, IA 52402

- The Disability Access Committee created Physical Accessibility Report (Report) that contains the barriers identified by the Disability Access Committee during its physical accessibility assessment.
- The Disability Access Committee used the Report to create this Transition Plan (Plan) for addressing the physical accessibility barriers to increase physical accessibility and meet the physical accessibility requirements under the ADA, ICRA, and WIOA.

## Tier 1 Barriers

The barriers identified in Tier 1 of this Plan must be eliminated no later than May 1st, 2019.

Barrier 1.1. Parking	
<b>Report Section:</b>	ADA Checklist Section 1.3, 1.5., 1.6., 1:11
<b>Access Issue:</b>	No accessible van spaces identified
<b>Solution:</b>	Describe
<b>Target Date:</b>	Month, Day, Year
<b>Person(s) Responsible:</b>	Landlord
<b>Comment(s):</b>	
Additional comment(s) here.	

Barrier 1.1. Parking	
<b>Report Section:</b>	ADA Checklist Section 1.4
<b>Access Issue:</b>	Only two of 7 accessible spaces are 8 foot wide; there are limited aisle and no aisles marked in two.
<b>Solution:</b>	Describe
<b>Target Date:</b>	Month, Day, Year
<b>Person(s) Responsible:</b>	Landlord
<b>Comment(s):</b>	
Additional comment(s) here.	

### Barrier 1.1. Parking

<b>Report Section:</b>	ADA Checklist Section 1.10
<b>Access Issue:</b>	5 middle parking lot spaces do not have signage.
<b>Solution:</b>	Describe
<b>Target Date:</b>	Month, Day, Year
<b>Person(s) Responsible:</b>	Landlord
<b>Comment(s):</b>	
Additional comment(s) here.	

### Barrier 1.5. Entrance(s)

<b>Report Section:</b>	ADA Checklist Section 1.39
<b>Access Issue:</b>	No signs to identify accessible entrance.
<b>Solution:</b>	Describe
<b>Target Date:</b>	Month, Day, Year
<b>Person(s) Responsible:</b>	Landlord
<b>Comment(s):</b>	
Additional comment(s) here.	

### Barrier 1.5. Entrance(s)

<b>Report Section:</b>	ADA Checklist Section 1.44
<b>Access Issue:</b>	Door handle is difficult to put hand behind it to open it. Auto door opener not working on this date
<b>Solution:</b>	Describe
<b>Target Date:</b>	Month, Day, Year
<b>Person(s) Responsible:</b>	Landlord
<b>Comment(s):</b>	
Additional comment(s) here.	

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## Tier 2 Barriers

The barriers identified in Tier 2 of this Plan must be eliminated no later than May 1st, 2020.

Barrier 2.4 Elevators	
<b>Report Section:</b>	ADA Checklist Section 2.31
<b>Access Issue:</b>	The sign is 63" high with the standard being no higher than 60"
<b>Solution:</b>	Describe
<b>Target Date:</b>	Month, Day, Year
<b>Person(s) Responsible:</b>	Landlord
<b>Comment(s):</b>	
Additional comment(s) here.	

Barrier 2.7 Interior Doors	
<b>Report Section:</b>	ADA Checklist Section: 2.40–2.46
<b>Access Issue:</b>	All interior doors are 12 pounds to open
<b>Solution:</b>	Describe
<b>Target Date:</b>	Month, Day, Year
<b>Person(s) Responsible:</b>	Landlord
<b>Comment(s):</b>	
Additional comment(s) here.	

## Tier 3 Barriers

The barriers identified in Tier 3 of this Plan must be eliminated no later than May 1st, 2021.

<b>Barrier 3.5. In the Toilet Room</b>	
<b>Report Section:</b>	ADA Checklist Section 3.20
<b>Access Issue:</b>	Coat hook is 54" with standard being no greater than 48".
<b>Solution:</b>	Describe
<b>Target Date:</b>	Month, Day, Year
<b>Person(s) Responsible:</b>	Landlord
<b>Comment(s):</b>	
Additional comment(s) here.	

<b>Barrier 3.8 Water Closets in Single-User Toilet Rooms &amp; Compartments (Stalls)</b>	
<b>Report Section:</b>	ADA Checklist Section 3:36
<b>Access Issue:</b>	Force to flush toilet is 7lbs.
<b>Solution:</b>	Describe
<b>Target Date:</b>	Month, Day, Year
<b>Person(s) Responsible:</b>	Landlord
<b>Comment(s):</b>	
Additional comment(s) here.	

### Barrier 3.8 Water Closets in Single-User Toilet Rooms & Compartments (Stalls)

<b>Report Section:</b>	ADA Checklist Section 3.38
<b>Access Issue:</b>	Toilet paper 13" from toilet
<b>Solution:</b>	Describe
<b>Target Date:</b>	Month, Day, Year
<b>Person(s) Responsible:</b>	Landlord
<b>Comment(s):</b>	
Additional comment(s) here.	

### Barrier 3.9 Stalls

<b>Report Section:</b>	ADA Checklist Section 3.41
<b>Access Issue:</b>	Door unable to open to 90 degrees.
<b>Solution:</b>	Describe
<b>Target Date:</b>	Month, Day, Year
<b>Person(s) Responsible:</b>	Landlord
<b>Comment(s):</b>	
Additional comment(s) here.	

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## **Authors**

This report was written by:

1. Holly Mateer , Iowa Vocational Rehabilitation Services
2. Jamie Phipps, Iowa Department for the Blind
3. Carla Andorf, Iowa Workforce Development

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## **Posted for Public Comment**

This Disability Access Committee posted this Plan for public comment from April 10th, 2018 until May 10th, 2018.

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## **Approval by Disability Access Committee**

This Disability Access Committee approved this Plan for submission to the Local Workforce Development Board on \_\_\_\_\_, 2017.

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## **Adoption by the Local Workforce Development Board**

The Local Workforce Development Board Plan adopted this Plan on \_\_\_\_\_, 2017.

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## **Submission to the State Disability Access Committee**

The Disability Access Committee submitted this Plan to the State Disability Access Committee on \_\_\_\_\_, 2017.