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Instructions for completing Facilities Packet. These instructions refer to the numbered items above.

1. Read, fill out completely and sign - return to Rehabilitation
2. Read, fill out completely and sign - return to Rehabilitation
3. Read, check appropriate boxes and sign - return to Rehabilitation
4. Read and sign - return to Rehabilitation
5. Read - keep for reference
6. Read - keep for reference

Complete the application, sign the assurances and other documents and return these to:

Jason Bennington - Employment Support Services Specialist
Utah State Office of Rehabilitation
1595 West 500 South
Salt Lake City, UT 84104
CRP@utah.gov

If you have questions or would like further explanation of any of the forms or the application process, please contact Jason by mail at the above address, email to (jbennington@utah.gov) or call him at (801) 887-9504.
COMMUNITY REHABILITATION PROGRAM APPLICATION

Name of Facility:
Contact Person:
Address:
Corporate Address:
Phone:
Email Address:
Type of Facility:

Check the types of services your organization offers:

_____ Assessment-type: _________________
_____ Supported Job Based Training (SJBT)
_____ Supported Employment (SE)
_____ Customized Employment (CE)
_____ Other: _______________________

Type of Ownership:
Individually Owned ______  Partnership _____  Corporate _____
For Profit _____  Non-Profit _____

Length of time program/facility has been in operation. ____________
Does the CRP have a municipal business license? __ __

Is there a legal action pending against this CRP? __ __
If yes, please explain in a separate attachment.

Has the CRP been charged for violation of state or federal laws? __ __
If yes, please explain in a separate attachment.

Is the financial operation of the CRP audited annually by an independent accountant? If no, please explain in a separate attachment. __ __

Does the CRP have proper public liability, worker’s compensation professional liability insurance? __ __

If transporting clients, does the CRP have auto liability insurance and/or verify employees auto liability insurance coverage. If so, how? Please include attachment.

Has the CRP read and reviewed USOR CSM Chapters 22 & 30? __ __

Will services be provided in a facility operated by the CRP? __ __

Have staff providing SE/SJBT services completed a USOR approved Job Coaching training? __ __

List the names of the facility’s administrative staff:

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
If the facility has a governing body, please list the names of all members:

GOVERNING BODY MEMBERS


Please list all staff members and include their appropriate credentials for their positions (e.g. John Smith, ACRE). Add attachments if necessary.

STAFF MEMBER  CREDENTIALS


I certify that the information contained herein is complete and accurate to the best of my knowledge, and is furnished for the purpose of obtaining USOR approval to offer services in the State of Utah, and in conformity with the standards set forth by USOR.

Should circumstances result in any modifications of the content, I will advise the USOR. I understand that failure to abide by the rules may result in a further review of services that are provided.

__________________________________________
Date

__________________________________________
Signature of Chief Executive Officer
VENDOR INFORMATION FORM

Check one

Name change   _____  1-Corporation
              _____  2-Medical Provider (all types)
Number change _____  3-Proprietorship/individual
              _____  4-Partnership
New           _____  5-Government-Exempt

We are required by Federal law to report to the Internal Revenue Service any payments made during each year. For this reason, we must be furnished with your Federal Tax Identification Number. This will either be an employer identification number or a social security number and will ensure remittance of our payment to you.

If you do not have a number or do not know your number, you may obtain an application for a number from any local office of the Department of Finance.

Please fill in the form below and return it to the address above.

1. Enter the Federal Tax I.D. Number in this box (9 digit number)
   
2. Please print or type:
   a. The exact name of record for this Federal Tax I.D. Number
   
   b. The mailing address
   
3. Person in charge (print or type)

__________________________________________
Signature of Vendor
ACCESSIBILITY ASSURANCE

Federal Law Rules and Regulations (PL 84-142. 34c FR 361.45) states:

A state unit must assure that any Rehabilitation Facility to be utilized in the provision of vocational rehabilitation services must comply with the requirements of the Architectural Barriers Act of 1968, and the Americans with Disabilities Act architectural guidelines for making buildings and facilities accessible to and usable by the physically handicapped.

Yes ______ No _______ the facility is accessible to individuals with disabilities.

If necessary will you provide your service in an alternative way to ensure that your services are accessible to person with disabilities? Yes______No _______

Americans with Disabilities Act (ADA), Regulation 36.303 Auxiliary Aids and Services states:

A public accommodation shall take those steps that may be necessary to ensure that no individual with a disability is excluded, denied services, segregated or otherwise treated differently than other individuals because of the absence of auxiliary aids and services, unless the public accommodation can demonstrate that taking those steps would fundamentally alter the nature of the goods, services, facilities, privileges, advantages, or accommodations being offered or would result in an undue burden, i.e., significant difficulty or expense.

Yes_______ No________ the CRP is willing to take the necessary steps to provide auxiliary aids and services in order to ensure that no individual with a disability is excluded, denied services, or segregated unless the facility can demonstrate that provision of these aids and assistance would fundamentally alter the nature of services or result in undue burden.

_________________________________ Date

_________________________________ Authorized Official

_________________________________ Name of Applicant

_________________________________ Street Address

_________________________________ City, State, Zip
CIVIL RIGHTS CERTIFICATE


The applicant provides this assurance in consideration of and for the purpose of obtaining Federal grants, loan contracts (except contracts of insurance or guaranty), property, discounts, or other Federal financial assistance to education programs or activities from the Department of Education.

The applicant assures that it will comply with:

1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C. 2000d et seq., which prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving Federal financial assistance.


4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance.

5. All regulations, guidelines, and standards lawfully adopted under the above statutes by the United States Department of Education.

The applicant agrees that compliance with this Assurance constitutes a condition of continued receipt of Federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided. The applicant further assures that all contractors, subcontractors, sub grantees or others with whom it arranges to provide services or benefits to its students or employees in connection with its education programs or activities are not discriminating in violation of the above statues, regulations, guidelines, and standards against those students or employees. In the event of failure to comply the applicant understands that assistance can be terminated and the applicant may at its discretion seek a court order requiring compliance with the terms of the Assurance or seek other appropriate judicial relief.

The person or persons whose signature(s) appear(s) below is/are authorized to sign this application, and to commit the applicant to the above provision.

__________________________  ______________________________
Date  Authorized Official(s)

__________________________
Name of Applicant of Recipient

__________________________
Street Address

__________________________
City, State, Zip Code
This is a brief explanation of the Americans with Disabilities Act, Title V of the Rehabilitation Act and the Architectural Barrier Act which may apply to the program or services that you provide to clients of the Utah State Office of Rehabilitation.

**Americans with Disabilities Act (ADA)**

The ADA prohibits discrimination on the basis of disability in employment, State and local government, public accommodations, commercial facilities, transportation, and telecommunications. It also applies to the United States Congress.

**ADA Title I: Employment**

Title I requires employers with 15 or more employees to provide qualified individuals with Disabilities a equal opportunity to benefit from the full range of employment-related opportunities available to others.

**ADA Title II: State and Local Government Activities**

Title II covers all activities of State and local governments regardless of the government entity’s size or receipt of Federal funding. Title II requires that State and local governments give people with disabilities an equal opportunity to benefit from all of their programs, services, and activities (e.g. public education, employment, transportation, recreation, health care, social services, courts, voting, and town meetings).

**ADA Title II: Public Transportation**

The transportation provisions of title II cover public transportation services, such as city buses and public rail transit (e.g. subways, commuter rails, Amtrak).

**ADA Title III: Public Accommodations**

Title III covers businesses and nonprofit service providers that are public accommodations, privately operated entities offering certain types of courses and examinations, privately operated transportation, and commercial facilities. Public accommodations are private entities who own, lease, lease to, or operate facilities such as restaurants, retail stores, hotels, movie theaters, private schools, convention centers, doctors’ offices, homeless shelters, transportation depots, zoos, funeral homes, day care centers, and recreation facilities including sports stadiums and fitness clubs. Transportation services provided by private entities are also covered by title III.

Public accommodations must comply with basic nondiscrimination requirements that prohibit exclusion, segregation, and unequal treatment. They also must comply with specific requirements related to architectural standards for new and altered buildings; reasonable modifications to policies, practices, and procedures; effective communication with people with hearing, vision, or speech disabilities; and other access requirements. Additionally, public accommodations must remove barriers in existing buildings where it is easy to do so without much difficulty or expense, given the public accommodation’s resources.

Courses and examinations related to professional, educational, or trade-related applications, licensing, certifications, or credentialing must be provided in a place and manner accessible to people with disabilities, or alternative accessible arrangements must be offered.
Commercial facilities, such as factories and warehouses, must comply with the ADA's architectural standards for new construction and alterations.

Complaints of title III violations may be filed with the Department of Justice. In certain situations, cases may be referred to a mediation program sponsored by the Department. The Department is authorized to bring a lawsuit where there is a pattern or practice of discrimination in violation of title III, or where an act of discrimination raises an issue of general public importance. Title III may also be enforced through private lawsuits. It is not necessary to file a complaint with the Department of Justice (or any Federal agency), or to receive a “right-to-sue” letter, before going to court. For more information, contact:

Disability Rights Section  
Civil Rights Division  
U.S. Department of Justice  
P.O. Box 66738  
Washington, D.C. 20035-6738

You may also call for information at:  (800) 514-0301 (voice)  
(800) 514-0383 (TDD)

**ADA Title IV: Telecommunications**

Title IV addresses telephone and television access for people with hearing and speech disabilities. It requires common carriers (telephone companies) to establish interstate and intrastate telecommunications relay services (TRS) 24 hours a day, 7 days a week.

**Rehabilitation Act**

The Rehabilitation Act prohibits discrimination on the basis of disability in programs conducted by Federal agencies, in programs receiving Federal financial assistance, in Federal employment, and in the employment practices of Federal contractors. The standards for determining employment discrimination under the Rehabilitation Act are the same as those used in title I of the Americans with Disabilities Act.

**Section 501**

Section 501 requires affirmative action and nondiscrimination in employment by Federal agencies of the executive branch. To obtain more information or to file a complaint, employees should contact their agency's Equal Employment Opportunity Office.

**Section 503**

Section 503 requires affirmative action and prohibits employment discrimination by Federal government contractors and subcontractors with contracts of more than $10,000.
Section 504
Section 504 states that “no qualified individual with a disability in the United States shall be excluded from, denied the benefits of, or be subjected to discrimination under” any program or activity that either receives Federal financial assistance or is conducted by any Executive agency or the United States Postal Service.
Each Federal agency has its own set of section 504 regulations that apply to its own programs. Agencies that provide Federal financial assistance also have section 504 regulations covering entities that receive Federal aid. Requirements common to these regulations include reasonable accommodation for employees with disabilities; program accessibility; effective communication with people who have hearing or vision disabilities; and accessible new construction and alterations. Each agency is responsible for enforcing its own regulations. Section 504 may also be enforced through private lawsuits. It is not necessary to file a complaint with a Federal agency or to receive a “right-to-sue” letter before going to court.

For information on 504, contact:

Disability Rights Section
Civil Rights Division
U.S. Department of Justice
P.O. Box 66738
Washington, D.C. 20035-6738
(800) 514-0301 (voice)
(800) 514-0383 (TDD)

Architectural Barriers Act
The Architectural Barriers Act (ABA) requires that buildings and facilities that are designed, constructed, or altered with Federal funds, or leased by a Federal agency, comply with Federal standards for physical accessibility. ABA requirements are limited to architectural standards in new and altered buildings and in newly leased facilities. They do not address the activities conducted in those buildings and facilities. Facilities of the U.S. Postal Service are covered by the ABA. For more information, contact:

The U.S. Architectural and Transportation Barriers Compliance Board
1331 F Street, N.W. (Suite 1000)
Washington, D.C. 20004-1111
(800) 872-2253 (voice)
(800) 993-2822 (TDD)
Standards

The following are the USOR general standards for Community Rehabilitation Programs:


2. Community Rehabilitation Programs shall use qualified personnel who possess applicable and necessary qualifications in the field in which they provide services. This includes completion of the required Job Coach training for all staff providing these services within 6 months of being approved by USOR.

3. Community Rehabilitation Programs shall make their programs accessible to people with disabilities and, to the fullest extent possible, pursue a policy of integration and inclusion for persons with disabilities.

4. Community Rehabilitation Programs, if involved in transporting clients, shall auto liability coverage and a means of verifying such insurance with employees if personal vehicles are being used. Minimum coverages required by USOR are $100,000 per person/$300,000 per incident.

5. Community Rehabilitation Programs shall have adequate and appropriate polices and procedures to prevent fraud, waste and abuse.

6. Community Rehabilitation Programs which provide on-site services shall comply with state and local health and safety standards.

7. Community Rehabilitation Programs shall maintain strict confidentiality of all information concerning clients, and shall release such information only to USOR or with prior, informed consent of clients.

8. Community Rehabilitation Programs shall have all appropriate licenses and certificates.

9. Community Rehabilitation Programs shall submit timely client progress reports to appropriate USOR staff.

10. Community Rehabilitation Programs shall make available records to designated USOR staff to evaluate the effectiveness of services, adherence to USOR standards, resulting rates of employment and other employment outcome related factors.

11. Community Rehabilitation Programs shall demonstrate 80% successful completion and employment rates.

12. Community Rehabilitation Programs shall have a process to provide an environment that is free from unlawful harassment based on race, religion, national origin, color, sex, age, disability or other protected class. Within this process shall exist a pathway whereby an individual may grieve alleged discrimination, harassment and/or unfair practices.
13. Community Rehabilitation Programs shall develop and implement a comprehensive Sexual Harassment Policy which will address the following issues:

   a. Procedures to adequately screen staff in regards to potential for past sexual harassment and/or assault type behavior which will include, but not limited to, a Background Criminal Investigation (BCI).
   b. A comprehensive plan to train staff in sexual harassment including, but not limited to what constitutes sexual harassment, types of sexual harassment, when to report sexual harassment and how to report sexual harassment. The plan should also demonstrate the facility commitment to ongoing training.
   c. Procedures on how the facility will educate and inform clientele on sexual harassment and the report procedure for clientele.
   d. Procedures on how the facility will investigate sexual harassment and the policy regarding consequences for sexual harassment behavior.
   e. Procedure that USOR may report sexual harassment to the facility including the name of the facility personnel handling sexual harassment reports.
   f. Procedures to communicate the disposition of the sexual harassment complaint to USOR.