



U.S. Department of Justice

*United States Attorney
Southern District of New York*

*86 Chambers Street
New York, New York 10007*

July 6, 2016

BY EMAIL AND REGULAR MAIL

Nadene M. Pinnock
Deputy General Counsel
New York City Department of Corrections
75-20 Astoria Boulevard
East Elmhurst, NY 11370

Re: Americans with Disabilities Act Investigation of
New York City Department of Correction

Dear Ms. Pinnock:

As you are aware, the United States Attorney's Office for the Southern District of New York (the "SDNY") has been conducting an investigation into whether the New York City Department of Correction ("DOC" or the "Department") complies with Title II of the Americans with Disabilities Act of 1990 ("ADA"), 42 U.S.C. § 12131 *et seq.*, and the Department of Justice's implementing regulation, 28 C.F.R. Part 35. We write to provide you with a report setting forth our findings with respect to (i) the accessibility of the area of Rose M. Singer Center ("RMSC") where DOC houses female inmates with mobility impairments and RMSC common areas used by these inmates; and (ii) the manner in which DOC responds to accommodation requests submitted by or on behalf of disabled inmates. We have previously provided you with reports setting forth our findings with respect to the accessibility of the North Infirmary Command ("NIC") Annex and the visiting areas of each of DOC's jails.

I. RMSC Accessibility

It is our understanding that the project to expand and renovate RMSC was completed in 2011, and that this project included the renovation of the area used to house female inmates with mobility impairments. Under the ADA, new construction or alterations commenced after July 26, 1992, but before September 15, 2010, must comply with either UFAS or the 1991 ADA Standards of Accessible Design ("1991 ADA Standards"), 28 C.F.R. Part 36, Appendix D. 28 C.F.R. § 35.151(c)(1). New construction or alterations commenced on or after September 15, 2010, but before March 15, 2012, must comply with either UFAS, the 1991 ADA Standards, or the 2010 ADA Standards for Accessible Design ("2010 ADA Standards"). 28 C.F.R. § 35.151(c)(2).

New construction or alterations commenced on or after March 15, 2012, must comply with the 2010 ADA Standards. 28 C.F.R. § 35.151(c)(3). Finally, a correctional facility must provide accessibility mobility features in at least 3% of its newly constructed or altered cells. 28 C.F.R. § 35.151(k).

The findings with respect to the accessibility of RMSC are based on the on-site inspection conducted by Mark J. Mazz, an architect specializing in ADA accessibility. Exhibit A to this letter sets forth the barriers that were identified during the inspection, as well as the minimum steps that DOC must take to meet its legal obligations and remedy the violations the SDNY has identified. The 1991 ADA Standards were used to determine the accessibility of RMSC. Elements that are identified as not complying with the requirements of the 1991 ADA Standards shall be modified to comply with the corresponding provision of the 2010 ADA Standards, which are also included in Exhibit A. All of the standards and regulations are available at www.ada.gov.

If you have difficulty identifying the location of a specific barrier referenced, please let us know and we can provide the corresponding photograph taken by Mr. Mazz.

II. Requests for Accommodations and Access to Services, Programs, and Activities

Title II of the ADA and its regulations impose a broad nondiscrimination mandate that no qualified individual with a disability shall, by reason of such disability, be excluded from participation in or be denied the benefits of services, programs, or activities of a public entity, or be subjected to discrimination by a public entity. 42 U.S.C. § 12132; 28 C.F.R. § 35.130(a). The Title II regulations specifically prohibit public entities that operate or manage jails from discriminating against individuals with disabilities. 28 C.F.R. § 35.152. Public entities are required to afford individuals with disabilities equal access to benefits and services provided, including at jails and correctional facilities. 28 C.F.R. §§ 35.130(b)(1)(i), 35.152(b). The Supreme Court has expressly held that the ADA's broad requirements apply to prisons and jails. *Pennsylvania Dep't of Corrections v. Yeskey*, 524 U.S. 206 (1998). The ADA imposes an affirmative obligation on public entities to "make reasonable modifications in policies, practices, or procedures when modifications are necessary to avoid discrimination on the basis of disability, unless the public entity can demonstrate that making the modification would fundamentally alter the nature of the service, program, or activity." 28 C.F.R. § 35.1530(b)(7). Public entities must "furnish appropriate auxiliary aids and services where necessary to afford individuals with disabilities . . . an equal opportunity to participate in, and enjoy the benefits of, a service, program, or activity of a public entity." 28 C.F.R. § 35.160(b)(1). In addition, public entities must "adopt and publish grievance procedures providing for prompt and equitable resolution" of complaints alleging violations of Title II of the ADA and its implementing regulations. 28 C.F.R. § 35.107(b).

In August 2004, DOC and the SDNY entered into a three-year Voluntary Compliance Agreement ("VCA") to resolve the SDNY's prior investigation into the

agency's compliance with the ADA. The VCA required DOC to designate an employee who would be responsible for, among other things, processing, investigating, and promptly acting upon inmate requests for accommodations, ensuring that staff are adequately trained on ADA issues, and ensuring that inmates with disabilities are housed in facilities that are ADA-compliant and accommodate their disabilities. VCA at § I.2. This individual is referred to as the Department's Disability Rights Coordinator for Inmates ("DRCI"). The VCA also required DOC to adopt procedures for the prompt and equitable resolution of requests for accommodations and ADA-related complaints. *Id.* at § III.8. Notwithstanding the VCA and resulting policy and procedure changes, our ongoing investigation has revealed that the Department still fails to consistently ensure that qualifying inmates are not subject to unlawful discrimination on account of their disability.

As part of our investigation, we reviewed the Department's current policies and training concerning the ADA, as well as records relating to requests for accommodations¹ submitted by or on behalf of inmates during the period 2012 through 2015. We also interviewed the DRCI, and reviewed information concerning the availability of programs and services at different Department facilities.

Set forth below are the SDNY's findings of fact and conclusions of law under Title II of the ADA, as well as the minimum steps that DOC must take to meet its legal obligations and remedy the violations the SDNY has identified. In sum, we found that DOC fails to consistently: (a) timely and adequately respond to accommodation requests; (b) place inmates with mobility and visual impairments in accessible housing areas; (c) provide inmates with mobility impairments with access to appropriate mobility devices; and (d) ensure that hearing impaired inmates have equal access to telecommunications services.

A. DOC Fails to Timely and Adequately Respond to Accommodation Requests.

DOC frequently fails to timely and adequately respond to requests for accommodation submitted by or on behalf of inmates with disabilities, and does not consistently comply with the requirements set forth in its own policies and procedures for evaluating and responding to ADA-related complaints. Pursuant to DOC Directive 3802, inmates may submit requests for accommodation by completing Inmate Reasonable Accommodation Request ("IRAR") forms, which are to be made available in counseling service units and law libraries. Directive 3802, § V.C.1. DOC is required to respond to such requests within five business days by either granting, denying, or modifying the

¹ Throughout this Letter of Findings, the term "accommodations" includes modifications to policies, practices, or procedures that are necessary "to avoid discrimination on the basis of disability," 28 C.F.R. § 35.130(b)(7), as well as the provision of "auxiliary aids and services where necessary to afford individuals with disabilities . . . an equal opportunity to participate in, and enjoy the benefits of, a service, program or activity," 28 C.F.R. § 35.160(b)(1).

request. *Id.* § V. C.6. If the determination is delayed, DOC must notify the inmate of the delay and the reason for it. *Id.* § V.C.6. In the event that a request is denied or modified, DOC is required to notify the inmate of the decision in writing, and such written response must advise the inmate of his or her right to grieve the decision. DOC is also obligated to maintain a “copy of all requests for accommodations, determinations and acknowledgments of such determinations.” *Id.* § V.D.

DOC does not respond to inmate requests for accommodation in a prompt manner, and certainly not within the 5-business day timeframe set forth in Directive 3802. We identified numerous instances where the DRCI repeatedly forwarded disability-related complaints and inquiries to Deputy Wardens and other corrections staff without receiving any response. During her interview with our Office, the DRCI acknowledged that facility managers are sometimes unresponsive to her inquiries and that it can be challenging to ensure that appropriate accommodations are provided because she does not have the authority to direct unformed staff to take specific actions. Inmates and their representatives also have complained about the Department’s unresponsiveness. Furthermore, the Department consistently fails to notify inmates or their representatives of the reasons for the delays, as is required by Directive 3802.

The Department also lacks an adequate system for recording and tracking accommodation requests, its responses to such requests, and the bases for its responses. We asked the Department to produce all IRAR forms and any “documentation concerning how each IRAR was addressed and/or resolved by DOC.” However, many of the files we received were sparse and contained no documentation reflecting the Department’s determination with respect to the inmate’s request. In addition, the Department’s production did not include any records whatsoever related to several requests that The Legal Aid Society had submitted on behalf of inmates, further demonstrating the Department’s noncompliance with its own internal record-keeping requirements. As a result, we frequently could not determine with certainty whether requests were ultimately granted or denied. In addition, the Department also does not consistently notify the inmate, or his or her representative, of its determination in writing, as is required by Directive 3802.

Moreover, it is unclear what, if any, remedies an inmate has if the Department denies or does not respond to his or her request for an accommodation. Directive 3802 states that an inmate has a right to file a grievance, Directive 3802, § V.C.14, but DOC’s Grievance Policy indicates that complaints of disability discrimination are considered “non-grievable.”

B. DOC Fails to Consistently Place Inmates with Mobility and Visual Impairments in Accessible Housing Areas.

DOC has failed to consistently assess the needs of inmates with disabilities and promptly place them in accessible housing units with ready access to the programs, services, and activities that are available to other non-disabled inmates. Although Directive 3802 requires staff to notify the DRCI within 24 hours of the admission of any new inmate who has or claims to have a disability, the current DRCI acknowledged that such notification is not always provided to her. The Department has failed to place some inmates with mobility and visual impairments in accessible housing upon their admission, and frequently does not grant their requests to be transferred to more accessible areas during their incarceration. As a result, these inmates are denied equal access to programs and services.

As the Department has conceded, the vast majority of its jails are not accessible to persons with disabilities and have significant structural barriers, such as split-level designs, inaccessible program spaces, and inaccessible pathways to and from housing areas. The Department has designated Dorm 3 of the NIC Annex (“NIC Annex Dorm 3”) — a ground floor housing unit with approximately 40-45 beds — to be used for inmates with mobility and visual impairments. The Department has added accessible features to NIC Annex Dorm 3 in an effort to make it ADA-compliant.² Resources and services for inmates with visual impairments, including books on tape and screen readers, are also available in NIC Annex Dorm 3. According to DOC policy, male inmates who have a “mobility impairment and use wheelchairs, crutches, canes or walkers” and/or “have a visual impairment that restricts their vision or has resulted in blindness” are to be housed in NIC Annex Dorm 3, provided that they do not “need medical assistance for activities of daily living” and “can conduct personal bodily functions independently.” However, inmates meeting DOC’s criteria have not been consistently placed in NIC Annex Dorm 3, and instead have remained in non-accessible facilities for lengthy periods of time.

Based on our review of DOC records relating to accommodation requests, several inmates with disabilities have requested to be transferred to NIC Annex Dorm 3, or to be at least relocated to a floor in their assigned jail with ready access to programs and medical services, and have either had their requests denied with little explanation or received no response at all.³ For example:

- In January 2014, a representative for inmate ██████████, who was housed in the Anna M. Kross Center (“AMKC”), requested that Mr. ██████ be hospitalized or transferred to the

² As noted in our prior report, the bathroom and bing cell in NIC Annex Dorm 3 did not fully comply with the 1991 ADA standards as of our last on-site inspection.

³ For purposes of this Letter of Findings, we assume that the Department did not respond to an inmate’s accommodation request when there is no documentation in the file reflecting a response, since Directive 3802 requires copies of determinations to be maintained. *See* Directive 3802, Section V.D.

NIC infirmary due to multiple disabling conditions. Several similar requests had been made on behalf of Mr. [REDACTED] dating back to as early 2012. Mr. [REDACTED] reportedly suffers from Charcot-Marie-Tooth Disease (an inherited neurological disorder affecting motor and sensory nerves), left side paralysis, seizure disorder, incontinence, and asthma. He also reportedly requires crutches to walk and uses braces for his wrist, back, and feet. The DRCI forwarded the January 2014 request to a Captain and conveyed that she was “most concerned about mobility related difficulties of [Mr. [REDACTED]]’s leg and arms, and [the] stated need for assistance with basic daily living tasks.” The DRCI received no response for several months. In October 2014, the Department determined that Mr. [REDACTED]’s condition did not warrant placement in the infirmary or NIC Annex Dorm 3, notwithstanding his mobility impairment. Instead, Mr. [REDACTED] was moved to a lower-level dorm in another jail where he could not navigate stairs to access services. DOC transferred Mr. [REDACTED] back to AMKC in December 2014.

- In April 2014, a representative for inmate [REDACTED] requested that Mr. [REDACTED] be transferred to NIC Annex Dorm 3 because he is legally blind. Mr. [REDACTED]’s left eye has been removed, and he suffers from degenerative conditions that significantly impair his vision in his right eye. A two-line email in the file states that Mr. [REDACTED]’s request to be transferred was denied after the inmate “was seen by an optometrist.” Despite several follow-up requests and Mr. [REDACTED]’s well-documented visual impairment, Mr. [REDACTED] was not placed in NIC Annex Dorm 3 until late 2015. Mr. [REDACTED] also requested a cane and a visor for his photosensitivity, as well as other reasonable accommodations. He submitted an IRAR, which was returned to him in its original envelope, unopened, with a post-it stating “NO CAN DO.”
- In May 2015, a representative for inmate [REDACTED], who reportedly suffered a torn meniscus in his right knee, requested that Mr. [REDACTED] be transferred from an upper level housing area to a barrier-free ground floor unit. The inmate reported that his condition had been aggravated by several falls down stairs. The DRCI forwarded the email to the Deputy Warden of jail. The records provided include no indication that DOC responded to this inquiry or that the inmate was relocated.

- Beginning in June 2015, representatives for inmate [REDACTED], who reportedly had sustained injuries that limited his ability ambulate after being attacked, repeatedly requested that Mr. [REDACTED] be provided with a wheelchair and transferred to NIC Annex Dorm 3. Mr. [REDACTED] claimed that he had fallen, hit his head, and lost consciousness while trying to ambulate with crutches, and was not able to access program services, including medical treatment, visitation, and religious services, due to the many steps in his housing area. According to Mr. [REDACTED], Bellevue Hospital had given him a prescription for a wheelchair. In September 2015, the DRCI met with Mr. [REDACTED] and observed that “he currently has great difficulties mobilizing, both short and longer distances, with the one crutch he is able to use.” The DRCI recommended that Mr. [REDACTED] be furnished with a wheelchair and be considered for transfer to the NIC Annex. The Department neither provided Mr. [REDACTED] with the requested wheelchair nor transferred him to NIC Annex Dorm 3.
- In November 2015, a representative for inmate [REDACTED], who reportedly has clubbed feet which cause extreme back pain and make it difficult for him to walk, complained that Mr. [REDACTED] had been improperly denied a wheelchair and requested that he be transferred from AMKC to NIC Annex Dorm 3. Mr. [REDACTED] had previously submitted a grievance requesting reasonable accommodations for his disability. Medical staff authorized the use of crutches, but did not provide Mr. [REDACTED] with a wheelchair. The Department did not transfer Mr. [REDACTED] to NIC Annex Dorm 3, despite his mobility impairment and the fact that he seemingly met the criteria for placement in that unit.

C. DOC Fails to Consistently Provide Inmates with Mobility Impairments with Access to Appropriate Mobility Devices.

DOC has failed to consistently and timely provide inmates with mobility impairments with access to appropriate devices to meet their needs, such as wheelchairs, canes, crutches, walkers, supportive footwear, braces, and other medically necessary equipment. In addition, corrections staff confiscate mobility devices without verifying with medical staff whether inmates have a legitimate medical need for the devices.⁴ For example:

⁴ DOC often has failed to comply with Teletype Order No. HQ-1494-0, which addresses the provision of assistive devices to inmates. According to that Order, uniformed staff are only authorized to confiscate an assistive device if the inmate is observed using the device “in a manner for which it is not intended.” In the event that a device is

- In January 2014, a representative for inmate ██████████, who reportedly has epileptic seizures and a degenerative hip condition resulting in osteoarthritis, complained that Mr. ██████████'s cane had been taken away and requested that it be returned. The records provided include no indication that DOC responded to this inquiry or that the cane was returned.
- In January 2014, a representative for inmate ██████████, who reportedly has back deformities, complained that staff had refused to provide Mr. ██████████ with a walker, a cane, and a back brace. The records provided include no indication that the inmate was evaluated in response to this inquiry to determine whether he needed an assistive device.
- In February 2014, a representative for inmate ██████████ who reportedly has nerve damage to his ankle, claimed that Mr. ██████████'s cane had been improperly seized. The records provided include no indication that DOC responded to this inquiry or that the cane was returned.
- In March 2015, a friend of inmate ██████████, who reportedly used a wheelchair and had been housed in the NIC infirmary since sustaining bilateral ankle fractures in March 2014, complained that Mr. ██████████ was transferred to the George R. Vierno Center ("GRVC") and denied a wheelchair in retaliation for filing a complaint regarding his medical treatment. At GRVC, Mr. ██████████ reportedly was forced to drag himself across the floor using his hands and arms and was denied access to various programs, including social and religious services. The DRCI was advised not to take any action upon receipt of the complaint. The records provided indicate that Mr. ██████████ was ultimately transferred to the West Facility as opposed to the NIC Annex, and there is no indication that the inmate was furnished with a wheelchair.
- In October 2015, inmate ██████████, who reportedly is a paraplegic and paralyzed from his waist down due to a gunshot wound to his spinal cord, was discharged from the NIC infirmary. According to his wife and representative, DOC placed Mr. ██████████ in upper tier housing at the Otis Bantum Correctional Center ("OBCC") and confiscated his wheelchair. Mr. ██████████ claimed that it was extremely difficult to walk with

confiscated due to alleged inappropriate usage, staff are required to escort the inmate "immediately for re-evaluation of their status to possess the device."

the cane he was given and that he needed to climb several sets of stairs to access programs. Mr. [REDACTED] also claimed that he was handcuffed to a gurney and placed in isolation for four days shortly after his arrival at OBCC. On November 9, 2015, the DRCI emailed a Deputy Warden to inquire why Mr. [REDACTED] was transferred to OBCC “where wheelchairs are not feasible.” The records provided include no indication that DOC transferred Mr. [REDACTED] to an accessible housing area or replaced his wheelchair, despite requests from Mr. [REDACTED]’s representatives.

- In November 2015, The Legal Aid Society advised DOC of a report that staff had confiscated the canes of all inmates in a housing area used for elderly inmates at the Robert D. Davoren Center (“RNDC”). During her interview with our Office in late January 2016, the DRCI advised us that she forwarded this email to her supervisor but was unaware of what steps had been taken in response to this report.

D. DOC Fails to Consistently Ensure that Hearing Impaired Inmates Have Equal Access to Telecommunication Services.

DOC has failed to ensure that all hearing impaired inmates have ready access to telecommunication devices that afford them the ability to communicate with their counsel, friends, and family during their incarceration. Although multiple TTY devices are supposed to be available in each jail, this appears to not always be the case. For instance, in a June 2014 email to DOC staff, the DRCI noted the failure to install a sufficient number of TTY devices in the George Motchan Detention Center (“GMDC”) and acknowledged that DOC “has been out of compliance with the ADA regarding TTY provisions for far too long[.]” In addition, the Department does not furnish video relay services, which are now the more common telecommunications method used by individuals with hearing impairments.⁵

Deaf and hard-of-hearing inmates have complained about their lack of access to telecommunications services. For example:

- In April 2014, a representative for inmate [REDACTED], a deaf inmate who was housed in GMDC, claimed that Mr. [REDACTED] was not able to communicate effectively with his family due to the lack of resources for individuals with hearing impairments. Mr. [REDACTED] alleged that correction officers did not allow him to use TTYs at GMDC and claimed that the machines were broken. DOC staff

⁵ The Department has advised us that it recently began exploring the use of video relay services.

failed to respond to the DRCI's repeated emails inquiring whether Mr. [REDACTED] was provided access to a TTY.

- In June 2014, a representative for inmate [REDACTED] who reportedly has a severe hearing impairment and was placed in punitive segregation, requested that DOC provide accommodations for the inmate's hearing impairment. The records provided include no indication that an accommodation was offered to Mr. [REDACTED]. In emails sent on July 3, 2014, the former DOC Deputy Commissioner for Integrity and Policy stated that Mr. [REDACTED] was "not in fact deaf, but hard of hearing," and there was no need to take further action because the inmate appeared able to communicate with family members on the telephone. There is nothing in the records provided to suggest that a medical examination was conducted to assess Mr. [REDACTED]'s hearing impairment or to determine whether accommodations were needed to ensure that he had meaningful access to programs and services.
- In early March 2015, inmate [REDACTED], a hearing impaired inmate who was placed in the Brooklyn Detention Complex ("BKDC"), complained about his lack of access to a TTY device. In an email sent on March 27, 2015, the DRCI requested that two TTYs be delivered to BKDC to accommodate Mr. [REDACTED]' request, and noted that although there should be two TTYs in each jail, she had "been receiving complaints that there are none available for inmates with hearing loss." The Department eventually provided Mr. [REDACTED] with access to a TTY, but staff limited him to six minutes per call — the minimum time generally allotted to non-disabled inmates — in violation of DOC's policy affording hearing impaired inmates at least 20 minutes per call due to the additional time associated with communicating via a TTY.

E. Conclusions of Law and Minimum Actions Necessary to Remedy Violations

DOC has violated Title II of the ADA by denying inmates with disabilities an equal opportunity to participate in and benefit from services, programs, or activities by: (i) placing inmates with mobility or vision impairments in inaccessible housing areas; (ii) failing to provide inmates with mobility impairments with medically necessary assistive devices; and (iii) failing to furnish hearing impaired inmates with appropriate aids and services to ensure that they have equal access to telecommunication services. 28 C.F.R. §§ 35.130(b)(1); 35.149, 35.152(b); 35.160(b)(1). To remedy these violations and address the deficiencies identified above, DOC should take the following steps at a minimum:

1. Conduct an ADA self-evaluation that includes the elements discussed in the Department of Justice, Technical Assistance Manual, at Section II-8.2000.
2. Provide effective training to all DOC staff on the requirements of the ADA, its regulations, and its applicability to the daily work of DOC staff.
3. Ensure the prompt and equitable resolution of requests for accommodation submitted by or on behalf of disabled inmates and any other ADA-related complaints.
4. Develop an effective system for tracking and recording requests for accommodation submitted by or on behalf of disabled inmates, and the Department's responses to such requests.
5. Ensure that inmates with disabilities receive a prompt and informed evaluation of their needs upon their admission to DOC custody.
6. Ensure that inmates with disabilities are placed in accessible housing areas where they have equal access to services, programs, and activities that are available to inmates without disabilities.
7. Ensure that inmates with mobility impairments are furnished with appropriate medical assistive devices and that such devices are not seized unless necessary for a legitimate security purpose and appropriate medical personnel are consulted.
8. Ensure that appropriate auxiliary aids and services, including video relay services, are available to inmates who are deaf or hard of hearing so that they can communicate with their counsel, friends, and family on an equal basis as inmates without disabilities.

We request that you respond to this Letter of Findings and propose corrective actions to address each violation within 60 days. Please support any claim that a particular problem or problems cannot be corrected because of the expense, technical infeasibility, or other reasons, with proper documentation.⁶ Thank you for your

⁶ Please note that this Letter of Findings is a public document and will be posted on the website of the United States Attorney's Office and at www.ada.gov.

continuing cooperation with our investigation.

Sincerely yours,

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Encl.

EXHIBIT A

RMSC: FACTUAL FINDINGS

A. General

1. Although there are visual alarms in several of the corridors in the facility, none of the alarms in the rooms, bathrooms, or cells include visual components. 1991 Standards § 4.1.3(14).

Visual alarms shall be provided whenever audible alarms are provided in the facility. 2010 Standards §§ 215, 232.2.2, 702.1, 807.3.1.

2. None of the punitive housing cells have accessible features.

A minimum of 3%, and no fewer than one, of the punitive housing cells shall provide accessible mobility features. 2010 Standards §§ 232.2.1, 807.2; 28 C.F.R. § 35.151(k).

3. The showers for the punitive housing cells are not accessible. 1991 Standards §§ 4.1.3(11), 4.23.8.

When showers are provided, at least one must be accessible. 2010 Standards §§ 213.2, 608.

B. Infirmary: General

1. There is only one water fountain and its spout is at the standard height. 1991 Standards §§ 4.1.3(10), 4.15.2.

Where drinking fountains are provided, there must be at least two. One spout must be no more than 36 inches above the floor so that it is accessible to wheelchair users, and one drinking fountain must have a spout between 38 inches and 43 inches above the finish floor for standing persons. 2010 Standards §§ 211, 602.

C. Infirmary: Bathroom in Waiting Area

1. The maneuvering space extends only 9 inches beside the latch side of the door. 1991 Standards §§ 4.1.3(7) & (8), 4.13.6.

Because the pull side of the door requires a forward approach, the maneuvering space must be 60 inches deep and must extend from the hinges to a line 18 inches to the side of the latch. 2010 Standards §§ 206.5, 404.2.4.

2. The turning space is only 57 inches wide. 1991 Standards §§ 4.1.3(11), 4.22.3

The bathroom must have an unobstructed turning space of either a 60-inch diameter circle or a 60-inch T-turn. 2010 Standards §§ 213.2, 603.2.1.

3. The bottom edge of the reflective surface of the mirror is mounted 41 ½ inches above the floor. 1991 Standards §§ 4.1.3(11), 4.19.6.

The bottom of the reflective edge of the mirror must be no more than 40 inches above the floor. 2010 Standards §§ 213.2, 213.3.5, 603.3.

4. The toilet paper dispenser is mounted on the rear wall. 1991 Standards §§ 4.1.3(11), 4.16.6.

The toilet paper dispenser must be mounted on the sidewall that has a grab bar. 2010 Standards §§ 213.2, 213.3.2, 604.7.

5. The lavatory partially blocks the maneuvering space. It protrudes 5 inches into the maneuvering space. 1991 Standards §§ 4.1.3(7) & (8), 4.13.6.

Because the push side of the door requires a forward approach and the door does not have a closer, the maneuvering space must be the width of the door for a depth of 48 inches. 2010 Standards §§ 206.5, 404.2.4.

6. The toilet is wall-hung and the seat is 15 ½ inches above the floor. 1991 Standards §§ 4.1.3(11), 4.16.3.

The toilet seat must be 17 - 19 inches above the floor. 2010 Standards §§ 213.2, 213.3.2, 604.4.

7. The front end of the sidewall grab bar is only 46 ½ inches from the rear wall, and the grab bar itself is only 36 inches long. 1991 Standards §§ 4.1.3(11), 4.16.4.

The sidewall grab bar at the toilet must be at least 42 inches long, within 12 inches of the rear wall, and extend at least 54 inches from the rear wall. 2010 Standards §§ 213.2, 213.3.2, 604.5.1.

8. The rear grab bar is only 24 inches long and is positioned completely to one side of the toilet. 1991 Standards §§ 4.1.3(11), 4.16.4.

The rear grab bar in a stall must be at least 36 inches long and must extend from the toilet centerline to at least 12 inches on one side and at least 24 inches on the other side. 2010 Standards §§ 213.2, 213.3.2, 604.8.1.5, 604.5.2.

D. Infirmary: Waiting Area Holding Cell

1. The maneuvering space extends only 9 inches beside the latch side of the door. 1991 Standards §§ 4.1.3(7) & (8), 4.13.6.

Because the pull side of the door requires a forward approach, the maneuvering space must be 60 inches deep and must extend from the hinges to a line 18 inches to the side of the latch. 2010 Standards §§ 206.5, 404.2.4.

2. The toilet reduces the depth of the cell to about 44 inches and the stool protrudes about 7 inches into the maneuvering space. 1991 Standards §§ 4.1.3(7) & (8), 4.13.6.

Because the push side of the door requires a forward approach and the door does not have a closer, the maneuvering space must be the width of the door for a depth of 48 inches. 2010 Standards §§ 206.5, 404.2.4.

3. The clear space is only 56 ½ wide and is partially blocked by the toilet and the stool. 1991 Standards § 4.1.6(1)(b).

Accessible holding cells must have an unobstructed turning space of either a 60-inch diameter circle or a 60-inch T-turn. 2010 Standards §§ 232.2.1, 807.2.4.

4. The bottom of edge of the reflective surface of the mirror is mounted 41 inches above the floor. 1991 Standards §§ 4.1.3(11), 4.19.6.

The bottom of the reflective edge of the mirror must be no more than 40 inches above the floor. 2010 Standards §§ 232.2.1, 807.2.4, 603.3.

5. The toilet blocks the knee space under the lavatory. 1991 Standards §§ 4.1.3(11), 4.19.2.

Knee space must be provided under the lavatory. 2010 Standards §§ 232.2.1, 807.2.4, 606.2.

6. The toilet is wall-hung and the seat is 15 inches above the floor. 1991 Standards §§ 4.1.3(11), 4.16.3.

The toilet seat must be 17 - 19 inches above the floor. 2010 Standards §§ 232.2.1, 807.2.4, 604.4.

7. The toilet centerline is angled to the sidewall and, therefore, is not 18 inches from the sidewall. 1991 Standards §§ 4.1.3(11), 4.16.2.

The toilet centerline must be between 16 and 18 inches from the sidewall. 2010 Standards §§ 232.2.1, 807.2.4, 604.2.

8. The rear grab bar is only 24 inches long and is positioned completely to one side of the toilet. 1991 Standards §§ 4.1.3(11), 4.16.4.

The rear grab bar in a stall must be at least 36 inches long and must extend from the toilet centerline to at least 12 inches on one side and at least 24 inches on the other side. 2010 Standards §§ 213.2, 213.3.2, 604.8.1.5, 604.5.2.

E. Infirmary: Specialty Clinic

1. In the bathroom, the maneuvering space is only 54 inches deep. *See* 1991 Standards §§ 4.1.3(7) & (8), 4.13.6.

The pull side of the door requires a forward approach. Therefore, the maneuvering space must be 60 inches deep and extend from the hinges to a line 18 inches to the side of the latch. 2010 Standards §§ 206.5, 404.2.4.

2. In the bathroom, the bottom edge of the reflective surface of the mirror is mounted 41 inches above the floor. 1991 Standards §§ 4.1.3(11), 4.19.6.

The bottom of the reflective edge of the mirror must be no more than 40 inches above the floor. 2010 Standards §§ 213.2, 213.3.5, 603.3.

3. In the bathroom, the toilet paper dispenser is mounted on the rear wall. 1991 Standards §§ 4.1.3(11), 4.16.6.

The toilet paper dispenser must be mounted on the sidewall that has a grab bar. 2010 Standards §§ 213.2, 213.3.2, 604.7.

F. Infirmary: Dormitory Dayroom

1. None of the tables provide clear floor space that is at least 30 inches wide and 19 inches deep. 1991 Standards §§ 4.1.3(18), 4.32.

If fixed tables and seats are provided, at least 5% of the seating spaces at tables must provide space for a wheelchair. A compliant wheelchair space must provide clear floor space under the table that is at least 30 inches wide and 17 inches deep. 2010 Standards §§ 226.1, 902.2, 305, 306.

2. The food pass is 42 inches above the floor. 1991 Standards §§ 7.2(2).

The entire food pass counter must be no more than 36 inches above the floor. 2010 Standards §§ 227.3, 904.4.

3. The alcove area is more than 24 inches deep but only 41 inches long. 1991 Standards §§ 4.2.4.2, 7.2(2).

There must be a parallel clear floor space adjacent to a portion of the service counter. Because the counter is recessed in an alcove or otherwise confined on three sides by more than 15 inches, it must be at least 60 inches long. 2010 Standards §§ 227.3, 904.4, 305.7.2.

G. Infirmary: Dormitory Serving Kitchen

1. The soap dispenser is 53 inches above the floor. *See* 1991 Standards §§ 4.1.3(13), 4.27.3.

The soap dispenser requires a side reach over an obstruction and therefore must be no more than 46 inches above the floor. 2010 Standards §§ 205, 309.3, 308.3.

H. Infirmary: Nurse's Station

1. The service counter is 45 inches above the floor. 1991 Standards §§ 7.2(2).

The entire service counter must be no more than 36 inches above the floor. 2010 Standards §§ 227.3, 904.4.

I. Infirmary: Dormitory Area

1. There is only one water fountain and its spout is less than 36 inches above the floor. 1991 Standards §§ 4.1.3(10), 4.15.2.

Where drinking fountains are provided, there must be at least two. One spout must be no more than 36 inches above the floor so that it is accessible to wheelchair users, and one drinking fountain must have a spout between 38 inches and 43 inches above the finish floor for standing persons. 2010 Standards §§ 211, 602.

2. The comment boxes on the wall are 56 inches above the floor and the desk is an obstruction. *See* 1991 Standards §§ 4.1.3(13), 4.27.3.

The comment boxes require a side reach over an obstruction and therefore must be no more than 46 inches above the floor. 2010 Standards §§ 205, 309.3, 308.3.

J. Infirmary: Dormitory Bathroom

1. The bottom edge of the reflective surface of the mirror is mounted 41 inches above the floor. 1991 Standards §§ 4.1.3(11), 4.19.6.

The bottom of the reflective edge of the mirror must be no more than 40 inches above the floor. 2010 Standards §§ 213.2, 213.3.5, 603.3.

2. The toilet paper dispenser is mounted on the rear wall. 1991 Standards §§ 4.1.3(11), 4.16.6.

The toilet paper dispenser must be mounted on the sidewall that has a grab bar. 2010 Standards §§ 213.2, 213.3.2, 604.7.

3. The front end of the sidewall grab bar is only 45 ½ inches from the rear wall. 1991 Standards §§ 4.1.3(11), 4.17.6.

The sidewall grab bar in a stall must be at least 42 inches long, within 12 inches of the rear wall, and extend at least 54 inches from the rear wall. 2010 Standards §§ 213.2, 213.3.1, 604.8.1.5, 604.5.1.

4. There are no horizontal grab bars in shower. 1991 Standards §§ 4.1.3(11), 4.21.4.

An accessible shower must have grab bars on at least two walls near a corner. One grab bar must be on the control wall and the other grab bar must be on the adjacent wall. 2010 Standards §§ 213.2, 213.3.6, 608.3.

5. There is no handheld showerhead and the fixed showerhead is 50 inches above the floor. 1991 Standards §§ 4.1.3(11), 4.21.6.

There must be either a handheld showerhead unit or the fixed showerhead must be mounted no more than 48 inches above the floor. 2010 Standards §§ 213.2, 213.3.6, 608.6.

K. Infirmary: Dormitory Med Lock # 5 (Isolation Cell)

1. The transfer shower is 43 inches wide and 32 inches deep. 1991 Standards §§ 4.1.3(11), 4.21.2.

Measured at the center points, the transfer shower must be exactly 36 inches by 36 inches. 2010 Standards §§, 232.3, 807.2.4, 608.2.1.

2. The threshold of the transfer shower is 4 inches high. 1991 Standards §§ 4.1.3(11), 4.21.7.

The shower threshold must be no more than ½ inch high. 2010 Standards §§ 232.3, 807.2.4, 608.7.

3. The control box in the transfer shower reduced the clear space to only 1 inch above the grab bar. 1991 Standards §§ 4.1.3(11), 4.21.4.

There must be at least 12 inches of clear space above the grab bars in the shower. 2010 Standards §§ 232.3, 807.2.4, 608.3, 609.3.

4. There is no handheld showerhead and the fixed showerhead is 70 inches above the floor. *See* 1991 Standards §§ 4.1.3(11), 4.21.6.

There must be either a handheld showerhead unit or the fixed showerhead must be mounted no more than 48 inches above the floor. 2010 Standards §§ 232.3, 807.2.4, 608.6

L. Intensive Treatment Unit

1. The clear floor space under the table is only 11 inches deep. *See* 1991 Standards §§ 4.1.3(18), 4.32.

A compliant wheelchair space must provide clear floor space under the table that is at least 30 inches and knee space under the table that is at least 27 inches tall and 17 inches deep. 2010 Standards §§ 226.1, 902.2, 305, 306.

2. In the serving kitchen, the paper towel dispenser above the sink is 56 inches above the floor. 1991 Standards §§ 4.1.3(13), 4.27.3.

The controls of the paper towel dispenser require a side reach over an obstruction that is not more than 34 inches tall and no more than 24 inches deep, and therefore the controls must be no more than 46 inches above the floor. 2010 Standards §§ 205, 309.3, 308.3.

3. In the serving kitchen, the soap dispenser above the sink is 53 inches above the floor. 1991 Standards §§ 4.1.3(13), 4.27.3.

The controls of the soap dispenser require a side reach over an obstruction that is not more than 34 inches tall and no more than 24 inches deep, and therefore the controls must be no more than 46 inches above the floor. 2010 Standards §§ 205, 309.3, 308.3.

4. In the serving kitchen, the food pass is 42 ½ inches above the floor. 1991 Standards §§ 7.2(2).

The food pass must be no more than 36 inches above the floor. 2010 Standards §§ 227.3, 904.4.

5. The highest control on the telephone is 60 inches above the floor. 1991 Standards §§ 4.1.3(17)(a), 4.31.3.

A parallel approach to the telephone is possible so the controls must be no more than 48 inches above the floor. 2010 Standards §§ 217.2, 704.2.2, 309.3, 308.3.

6. In the bathroom, there are 7 stalls and none complies with the ambulatory stall requirements. 1991 Standards §§ 4.1.3(11), 4.22.4.

When there are at least 6 stalls provided, at least one must comply with the ambulatory stall requirements. 2010 Standards §§ 213.2, 213.3.1, 604.8.2.

7. In the bathroom, the toilet paper dispenser is mounted on the rear wall. 1991 Standards §§ 4.1.3(11), 4.16.6.

The toilet paper dispenser must be mounted on the sidewall that has a grab bar. 2010 Standards §§ 213.2, 213.3.2, 604.7.

8. In the bathroom, the front end of the sidewall grab bar is only 44 ½ inches from the rear wall. 1991 Standards §§ 4.1.3(11), 4.17.6.

The sidewall grab bar in a stall must be at least 42 inches long, within 12 inches of the rear wall, and extend at least 54 inches from the rear wall. 2010 Standards §§ 213.2, 213.3.2, 604.8.1.5, 604.5.1.

9. In the bathroom, there is no handheld showerhead and the fixed showerhead is 51 inches above the floor. 1991 Standards §§ 4.1.3(11), 4.21.6.

There must be either a handheld showerhead unit or the fixed showerhead must be mounted no more than 48 inches above the floor. 2010 Standards §§ 213.2, 213.3.6, 608.6.

10. In the shower of the bathroom, the clothes hook is 60 inches above the floor. 1991 Standards §§ 4.1.3(12), 4.25.3.

The clothes hook must be accessible. Because an unobstructed side reach is possible, the clothes hook must be no more than 54 inches above the floor. 2010 Standards §§ 213.2, 213.3.7, 603.4, 308.3.

M. Intake Area

1. At the base of the entrance ramp, there is a change in level of 1 ½ inches that is not beveled. 1991 Standards §§ 4.1.2(1) & (2), 4.5.2.

Changes in level that are more than ¼ of an inch must be beveled. 2010 Standards §§ 206.2.1, 303.3.

2. At the entrance door, the maneuvering space has a slope of 9.3%. 1991 Standards §§ 4.1.3(7) & (8), 4.13.6.

The maneuvering space at the door cannot slope more than 2%. 2010 Standards §§ 206.5, 404.2.4.4.

3. In the receiving/holding cell, the bench is only 14 ½ inches deep. 1991 Standards § 4.1.6(1)(b).

The bench must be 17 – 19 inches above the floor, 20 - 24 inches deep, and at least 42 inches long. The bench also must have a back support along the 42-inch side. 2010 Standards §§ 232.3, 807.2.2, 903.

4. In the receiving/holding cell, there is no clear space positioned to the side of the bench. 1991 Standards § 4.1.6(1)(b).

A clear floor space must be positioned at the end of the bench, parallel to the short side of the bench. 2010 Standards §§ 232.3, 807.2.2, 903.2.

5. In the receiving/holding cell, the sidewall grab bar at the toilet is only 36 inches long and the front end of the grab bar is only 42 inches from the rear wall. 1991 Standards §§ 4.1.3(11), 4.16.4.

The sidewall grab bar at the toilet must be at least 42 inches long, within 12 inches of the rear wall, and extend at least 54 inches from the rear wall. 2010 Standards §§ 232.3, 807.2.4, 604.5.1.

6. In the receiving/holding cell, the toilet centerline is 20 inches from the sidewall. 1991 Standards §§ 4.1.3(11), 4.16.2.

The toilet centerline must be between 16 and 18 inches from the sidewall. 2010 Standards §§ 232.3, 807.2.4, 604.2.

7. In the intake search area, the accessible route to the dressing alcoves, at the countertop, is only 30 ¼ inches wide. 1991 Standards §§ 4.1.3(1), 4.3.3.

The accessible route must be 36 inches wide. 2010 Standards §§ 206.2.4, 403.5.

8. In the intake search area, none of the dressing alcoves has benches or provides adequate clear floor space. 1991 Standards § 4.35.

At least 5% of each type of dressing alcove in each cluster must be accessible. 2010 Standards §§ 222, 803.

9. In the intake bathroom, the threshold at the door to the shower room is 1 ¼ inches high and is not beveled. 1991 Standards § 4.1.6(3)(d)(ii).

In existing facilities, thresholds cannot be more than ¾ of an inch high. Changes in level that are more than ¼ of an inch must be beveled. 2010 Standards §§ 206.5, 404.2.5.

10. The intake bathroom does not have any accessible features. 1991 Standards § 4.1.3(11).

The bathroom must be accessible. 2010 Standards § 213.2, 213.3.

N. Yard

1. The threshold at the entrance to the yard is several inches tall. 1991 Standards §§ 4.1.6(3)(d)(ii).

In existing facilities, thresholds cannot be more than ¾ of an inch high. Changes in level that are more than ¼ of an inch must be beveled. 2010 Standards §§ 206.5, 404.2.5.

2. None of the tables provides clear floor space that is at least 30 inches wide and 19 inches deep. 1991 Standards § 4.1.3(18), 4.32.

If fixed tables and seats are provided, at least 5% of the seating spaces at tables must provide space for a wheelchair. A compliant wheelchair space must provide clear floor space under the table that is at least 30 inches wide and 17 inches deep. 2010 Standards §§ 226.1, 902.2, 305, 306.

3. There is only one water fountain and its spout is at the standard height. 1991 Standards §§ 4.1.3(10), 4.15.2.

Where drinking fountains are provided, there must be at least two. One spout must be no more than 36 inches above the floor so that it is accessible to wheelchair users, and one drinking fountain must have a spout between 38 inches and 43 inches above the finish floor for standing persons. 2010 Standards §§ 211, 602.

O. Gymnasium Area

1. The slot of the Warden's mailbox, located in the corridor near the gymnasium, is 62 inches above the floor. *See* 1991 Standards §§ 4.1.3(13), 4.27.3.

Because there is no obstruction and a side reach is possible, the slot must be no more than 46 inches above the floor. 2010 Standards §§ 205, 309.3, 308.3.

2. There is bleacher seating in the gymnasium but no wheelchair spaces are provided that are integrated into the bleacher seating area. 1991 Standards §§ 4.1.3(19)(a).

Because fixed assembly seating is provided, accessible wheelchair spaces must be provided. 2010 Standards §§ 221, 802.

3. The clear opening of the entrance door is 28 ½ inches. *See* 1991 Standards §§ 4.1.3(7)&(8), 4.13.5.

The doorway must have a minimum clear opening of 32 inches when the door is open 90 degrees. 2010 Standards §§ 206.5, 404.2.3.

4. The accessible route to the dressing alcoves, at the countertop, is only about 24 inches wide. 1991 Standards § 4.1.3(1), 4.3.3.

The accessible route must be 36 inches wide. 2010 Standards §§ 206.2.4, 403.5.

5. None of the dressing alcoves has benches or provides adequate clear floor space. 1991 Standards § 4.35.

At least 5% of each type of dressing alcove in each cluster must be accessible. 2010 Standards §§ 222, 803.

6. There is only one water fountain and its spout is less than 36 inches above the floor. 1991 Standards §§ 4.1.3(10), 4.15.2.

Where drinking fountains are provided, there must be at least two. One spout must be no more than 36 inches above the floor so that it is accessible to wheelchair users, and one drinking fountain must have a spout between 38 inches and 43 inches above the finish floor for standing persons. 2010 Standards §§ 211, 602.

P. Religious Area

1. The inmate bathroom does not have any accessible features. 1991 Standards § 4.1.3(11).

The bathroom must be accessible. 2010 Standards §§ 213.2, 213.3.

2. There are 72 fixed assembly seats at the chapel, but no wheelchair spaces are provided. 1991 Standards § 4.1.3(19)(a).

Because fixed assembly seating is provided, accessible wheelchair spaces must be provided. 2010 Standards §§ 221, 802

Q. School

1. There are three water fountains and none have a spout at the standard height. 1991 Standards §§ 4.1.3(10), 4.15.2.

When more than two drinking fountains are provided, 50% of the drinking fountains on the floor must have spouts between 38 and 43 inches above the finish floor. 2010 Standards §§ 211, 602.7.

2. In the art room, the knee space under the tables is only 26 ½ inches high. 1991 Standards §§ 4.1.3(18), 4.32.3.

At least 5% of the seating spaces at tables must provide space for a wheelchair. A compliant wheelchair space must provide knee clearance at least 27 inches high. 2010 Standards §§ 226.1, 902.2, 305, 306.

3. In the culinary arts area, the top of the sink is 39 ¼ inches above the floor and the faucet is 28 inches from the front edge. 1991 Standards §§ 4.1.3(13), 4.32.3.

The faucet controls must be within reach and a side reach over the countertop is required. For the controls to be within reach, the countertop must be no more than 34 inches above the floor and the controls cannot be more than 24 inches from the front edge of the counter. If the counter is more than 34 inches tall, then the operable part must be within 10 inches of the front edge and must be no more than 48 inches above of the floor. 2010 Standards §§ 205, 309.3, 308.3.2.

4. The accessible route to the computer room narrows to only 25 ½ inches wide between the desk and the doorway. 1991 Standards §§ 4.1.2(1) & (2), 4.4.1.

The accessible route may narrow to 32 inches for a distance of no more than 24 inches. 2010 Standards §§ 206..2.4, 403.5.

5. In the computer room, the knee space under the desks is only 23 ¾ inches high. 1991 Standards §§ 4.1.3(18), 4.32.3.

At least 5% of the seating spaces at tables must provide space for a wheelchair. A compliant wheelchair space must provide knee clearance at least 27 inches high. 2010 Standards §§ 226.1, 902.2, 305, 306.

R. Bathroom in Library

1. The toilet paper dispenser is mounted on the rear wall. 1991 Standards §§ 4.1.3(11), 4.16.6.

The toilet paper dispenser must be mounted on the sidewall that has a grab bar. 2010 Standards §§ 213.2, 213.3.2, 604.7.

2. The front end of the sidewall grab bar is only 48 inches from the rear wall. 1991 Standards §§ 4.1.3(11), 4.16.4.

The sidewall grab bar at the toilet must be at least 42 inches long, within 12 inches of the rear wall, and extend at least 54 inches from the rear wall. 2010 Standards §§ 213.2, 213.3.1, 604.8.1.5, 604.5.1.

3. There are 7 stalls and none complies with the ambulatory stall requirements. 1991 Standards §§ 4.1.3(11), 4.22.4.

When there are at least 6 stalls provided, at least one must comply with the ambulatory stall requirements. 2010 Standards §§ 213.2, 213.3.1, 604.8.2.

S. Law Library

1. The knee space under the tables is only 25 inches high. 1991 Standards §§ 4.1.3(18), 4.32.3.

At least 5% of the seating spaces at tables must provide space for a wheelchair. A compliant wheelchair space must provide knee clearance at least 27 inches high. 2010 Standards §§ 226.1, 902.2, 305, 306.

T. Inmate Drug Testing Unit

1. The unit does not have any accessible features. 1991 Standards § 4.1.3(11).

The bathroom must be accessible. 2010 Standards §§ 213.2, 213.3.

U. Bathroom in Auditorium

1. The toilet paper dispenser is mounted on the rear wall. 1991 Standards §§ 4.1.3(11), 4.16.6.

The toilet paper dispenser must be mounted on the sidewall that has a grab bar. 2010 Standards §§ 213.2, 213.3.2, 604.7.

2. The rear grab bar extends only 6 inches from the toilet centerline to the wall side. 1991 Standards §§ 4.1.3(11), 4.16.4.

The rear grab bar in a stall must be at least 36 inches long and must extend from the toilet centerline to at least 12 inches on one side and at least 24 inches on the other side. 2010 Standards §§ 213.2, 213.3.2, 604.8.1.5, 604.5.1.

V. Commissary

1. The accessible route in front of the merchandise is only 31 inches wide. 1991 Standards §§ 4.1.3(1), 4.3.3.

The accessible route must be 36 inches wide. 2010 Standards §§ 206.2.4, 403.5.

2. The alcove area is about 20 inches deep but only about 54 inches long. 1991 Standards §§ 4.2.4.2, 7.2(2).

There must be a parallel clear floor space adjacent to a portion of the service counter. Because the counter is recessed in an alcove or otherwise confined on three sides by more than 15 inches, it must be at least 60 inches long. 2010 Standards §§ 227.3, 904.4, 305.7.2.

W. Bathroom in Social Service Area

1. The bottom edge of the reflective surface of the mirror is mounted 41 inches above the floor. 1991 Standards §§ 4.1.3(11), 4.19.6.

The bottom of the reflective edge of the mirror must be no more than 40 inches above the floor. 2010 Standards §§ 213.3.5, 603.3.

2. The toilet paper dispenser is mounted on the rear wall. 1991 Standards §§ 4.1.3(11), 4.16.6.

The toilet paper dispenser must be mounted on the sidewall that has a grab bar. 2010 Standards §§ 213.2, 213.3.2, 604.7.

X. Bathroom in Mental Health Services Waiting Area

1. The bottom edge of the reflective surface of the mirror is mounted 41 inches above the floor. 1991 Standards §§ 4.1.3(11), 4.19.6.

The bottom of the reflective edge of the mirror must be no more than 40 inches above the floor. 2010 Standards §§ 213.2, 213.3.5, 603.3.

2. The toilet paper dispenser is mounted on the rear wall. 1991 Standards §§ 4.1.3(11), 4.16.6.

The toilet paper dispenser must be mounted on the sidewall that has a grab bar. 2010 Standards §§ 213.2, 213.3.2, 604.7.

3. The front end of the sidewall grab bar is only 48 inches from the rear wall. 1991 Standards §§ 4.1.3(11), 4.16.4.

The sidewall grab bar at the toilet must be at least 42 inches long, within 12 inches of the rear wall, and extend at least 54 inches from the rear wall. 2010 Standards §§ 213.2, 213.3.2, 604.5.1.

Y. Nursery

1. The bathroom in the nursery does not have any accessible features. 1991 Standards § 4.1.3(11).

The bathroom must be accessible. 2010 Standards §§ 213.2, 213.3.

2. None of the 23 housing cells have accessible features.

A minimum of 3%, and no fewer than one, of the cells must be accessible. 2010 Standards § 232.2; 28 C.F.R. § 35.151(k).

3. The soap dispenser and hand sanitizer mounted on the wall above the common use sink are out of reach. The counter, an obstruction, is 36 inches above the floor and the soap dispenser and hand sanitizer are about 24 inches from the front edge. 1991 Standards §§ 4.1.3(13), 4.27.3.

Access to the soap dispenser and hand sanitizer requires a side reach over an obstruction. If the obstruction is no more than 34 inches tall and no more than 24 inches deep, then the operable part must be no more than 46 inches above the floor. If the obstruction is more than 34 inches tall, then the operable part must be within 10 inches of the front edge and must be no more than 48 inches above of the floor. 2010 Standards §§ 205, 309.3, 308.3.

4. The faucet of the common use sink is out of reach because the cabinet is 36 inches above the floor. 1991 Standards §§ 4.1.3(13), 4.27.3.

A side reach over the counter, an obstruction, that is more than 34 inches may be used only if the faucet is within 24 inches of the front edge and the controls are no more than 46 inches above the floor. 2010 Standards §§ 205, 309.3.

5. The faucet of the common use sink has knobs that require twisting of the wrist to operate. 1991 Standards §§ 4.1.3(13), 4.27.4.

The faucet must be operable without tight grasping, tight pinching, or twisting of the wrist. 2010 Standards §§ 212.3, 606.4.

6. In the servery, there is only one water fountain and its spout is at the standard height. 1991 Standards §§ 4.1.3(10), 4.15.2.

Where drinking fountains are provided, there must be at least two. One spout must be no more than 36 inches above the floor so that it is accessible to wheelchair users, and one drinking fountain must have a

spout between 38 inches and 43 inches above the finish floor for standing persons. 2010 Standards §§ 211, 602.

7. In the servery, the soap dispenser above the sink is 52 inches above the floor. 1991 Standards §§ 4.1.3(13), 4.27.3.

The controls of the soap dispenser require a forward reach so it must be no more than 48 inches above the floor. 2010 Standards §§ 205, 309.3, 308.3.

8. In the servery, the clear floor space for the paper towel dispenser is blocked by kitchen counters. 1991 Standards §§ 4.1.3(13), 4.27.3.

Operable parts that need to be accessible must have a level 30 inches by 48 inches clear floor space. 2010 Standards §§ 205, 309.2, 305.

9. In the servery, the paper towel dispenser is 58 inches above the floor. 1991 Standards §§ 4.1.3(13), 4.27.3.

The controls of the paper towel dispenser require a forward reach so it must be no more than 48 inches above the floor. 2010 Standards §§ 205, 309.3, 308.3.

10. In the servery, the operable parts of the washer and dryer are not within 10 inches of the front edge.

The operable parts of the washer and dryer, including lint trap and detergent reservoirs, must be accessible. Because a side reach over the machine, which is 34 inches tall, is required, the operable parts must be within 10 inches of the front edge and within 48 inches of the floor. 2010 Standards §§ 214, 611.3, 309.3, 308.3.