CITY OF SANTA BARBARA ADMINISTRATIVE
Policy No. TBA
POLICIES:
ADA Grievance Procedure

Issued by: ADA Coordinator	Adopted: 1992 Updated: August 2026

PURPOSE

The City of Santa Barbara is committed to ensuring that people with disabilities are able to take part in, and benefit from, the whole range of public programs, services, and activities offered by the City. The City continues to modify its facilities, programs, policies, or practices, as necessary, to ensure such access is provided.

Title II of the Americans with Disabilities Act (ADA) requires that public entities adopt and publish grievance procedures to assure the prompt and equitable resolution of complaints. The purpose of this ADA grievance procedure is to resolve as promptly as possible any problems, complaints, or conflicts related to the City's ADA compliance without the need for the complainant to resort to other remedies available under the law.

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Please note: This procedure applies only to the property, programs, and services of the government of the City of Santa Barbara. For information or assistance with regard to private property, please contact the City's Chief Building Official at (805)564-5553.

1. WHO MAY FILE A GRIEVANCE?

You or your authorized representative may file an ADA grievance if you believe that:

- The City is not in compliance with the physical access requirements of the Americans with Disabilities Act related to its public facilities, land, or rights-of-way, or
- You or a specific class of individuals have been denied access to participate in a City programs, services, or activities on the basis of disability, or
- You or a specific class of individuals have been otherwise subjected to discrimination on the basis of disability by the City of Santa Barbara, or
- The City has otherwise violated theADA.

2. WHEN SHOULD A GRIEVANCE BE FILED?

Before filing a grievance, you may seek informal resolution by contacting the Department Head of the affected department. A current list of the Department heads can be found at the City's website on https://www.santabarbaraca.gov/gov/cityhall/officials.asp. The City encourages, but does not require, an attempt to resolve concerns informally prior to filing a formal grievance. If your informal concern is not resolved in a timely fashion, you have the right to file a formal grievance under this procedure.

You are encouraged to file your grievance within 30 days of the date you become aware of any alleged discrimination or access violation. If reasonable circumstances prevent you from filing your grievance within that time period, the City may accept your grievance later than 30 days after the alleged incident(s). Failure to report an alleged violation within 180 days may impact your ability to redress your grievance.

3. WHAT SHOULD THE GRIEVANCE INCLUDE?

You may file your grievance on the attached form (Attachment 1). If you choose not to use the form, your grievance may be filed either in writing or verbally and must include the following information:

a. Your name, address and telephone number. If a representative is filing the grievance on your behalf, his or her name, address and telephone number must also be included.

b. A description of the offending behavior(s) or action(s) or violation(s).

c. The date(s), time(s) and location(s) of theincident(s).

d. If the incident(s) involved a City of Santa Barbara employee(s), his or her name(s) should be included, if you knowit.

e. The name(s) and contact information of witnesses, ifany.

f. If your grievance is being filed on behalf of another person or a group of people, all of the grievants should be described or identified by name, if possible.

g. The remedy you desire.

h. Your signature or the signature of your authorized representative.

The City will make every reasonable effort to ensure that confidentiality is maintained throughout the complaint and investigation process, to the extent consistent with the law, adequate investigation, and appropriate corrective action. This means that the City will share information only on a need-to-know basis.

4. WHERE SHOULD I SUBMIT MY GRIEVANCE?

You may file your grievance with the City's designated ADA Coordinator. The ADA Coordinator's name, office address and telephone number are:

Brian D'Amour, P.E.,
Public Works Director, (ADA Coordinator)
630 Garden Street
P.O. Box 1990
Santa Barbara, CA 93102-1990
(805) 564-5378 phone
ADA@santabarbaraca.gov email

You may mail your grievance, fax it, e-mail it, or deliver it in person.

If you believe the ADA Coordinator is involved in alleged discrimination, you should submit your grievance to the City Administrator, Kelly McAdoo 805-564-5510, KMcAdoo@santabarbaraca.gov

5. WHAT IF I NEED ASSISTANCE FILLING OUT MY GRIEVANCE?

ADA Grievances may be filed by mail, by phone, or by e-mail. Assistance is available from the ADA Coordinator. You should contact his/her office and request the type of assistance you need. The ADA Grievance Procedure and Complaint Form are available in alternative formats upon request from the ADA Coordinator. Verbal grievances should be filed with the ADA Coordinator.

6. WHAT HAPPENS AFTER I FILE MY GRIEVANCE?

After receiving your grievance, the Department Head, ADA Coordinator, or his/her designee, will investigate. The investigation may include, but may not be limited to, interviews with: (a) you; (b) the person(s), if any, who allegedly discriminated against you; and (c) any other person the investigator believes to have relevant knowledge concerning your grievance. The investigator will also consider any written evidence that is given to him/her.

After completing the investigation, the investigator will review the factual information gathered through the investigation to determine whether discrimination has occurred or the ADA has been otherwise violated. The investigator will consider all of the factual information, all the circumstances, and the context in which any alleged incident(s) occurred.

The investigator will then prepare a written report which will include: (1) the results of the investigation; (2) a determination as to whether discrimination occurred or access requirements have been violated; and (3) any appropriate remedy which the City will provide. A copy of the report will be sent to you, and a copy will be sent to both the Department Head and the ADA Coordinator. The ADA Coordinator will then issue a written response to thecomplaint.

7. WHEN WILL I RECEIVE A RESPONSE?

Within 15 days of the City's receipt of the grievance, you will receive a confirmation that it has been received and is being investigated. If you do not receive a confirmation within 15 days, please contact the ADA Coordinator. Absent extenuating circumstances, all grievances will be investigated, and a response issued, within 90 days of receipt of the grievance. If a delay is expected, the Department Head or ADA Coordinator will notify you in writing of the reason(s) for the delay, and the date by which you will receive a response.

8. SHOULD I BE CONCERNED THAT A CITY OFFICER OR EMPLOYEE MIGHT RETALIATE AGAINST ME IF ICOMPLAIN?

The City will not retaliate against you for filing a grievance and will not knowingly permit retaliation by its officers or employees. The City will take reasonable steps to protect you from retaliation by others as a result of filing a grievance. Please let the ADA Coordinator know immediately if you feel you are being retaliated against for filing a grievance.

9. WHAT CAN I DO IF I AM NOT SATISFIED WITH THE RESULTS OF THE CITY'S INVESTIGATION?

If you are not satisfied with the results of the investigation, you may submit a verbal or written appeal within 20 days of your receipt of the findings. Your appeal should detail the reasons you believe the findings to be in error. You will receive a response within 20 days of the day you submit your appeal.

Your appeal should be directed to the Assistant City Administrator. A written response to the appeal, approved by the City Administrator, will be issued within 20 days.

If you are not satisfied with the results of the appeal, you may file a complaint with the appropriate agency or department of the State or Federal government. Contact the U.S. Department of Justice, the U.S. Department of Education Office for Civil Rights, or the California Department of Justice Civil Rights Division for information about how to file a complaint with these agencies. You may also sue the City in federal court.

Using this grievance procedure is not a prerequisite to pursuing any of your other remedies. However, in the interest of a prompt resolution of alleged discrimination, the City encourages you to use this procedure in addition to any other available remedies you may choose.

ATTACHMENT 1

CITY OF SANTA BARBARA

GRIEVANCE FORM

COMPLAINT OF ACCESS VIOLATION OR DISCRIMINATION ON THE BASIS OF DISABILITY

The City will make every reasonable effort to ensure that confidentiality is maintained throughout the complaint and investigation process, to the extent consistent with the law, adequate investigation, and appropriate corrective action. This means that the City will share any sensitive information you provide here only on a need-to-know basis.

Individual identifying access violation or discrimination	Name	
	Address	
	Telephone	
Authorized representative of individual above (if any)	Name	
	Address	
	Telephone	

1. Please describe the City of Santa Barbara's alleged violation of access requirements, or discriminatory action, in enough detail so that the nature of your grievance can be clearly understood. Add additional pages if necessary:

2. Please give the date(s), time(s) and location(s) of the incident(s) or observation(s) you are reporting:

3. If the incident involves a City of Santa Barbara employee(s) please provide his or her name(s), if known:

4. If the grievance involves physical access to a City of Santa Barbara public facility, land, or right-of-way, please provide the specific address(s) of those locations, if known:

5. Please give the name(s) and address(es), if known, of any witnesses to the access violation or alleged discrimination:

6. If this complaint is filed on behalf of a second person, or on behalf of a group of people, please provide the names and addresses of all of the grievant(s), if possible:

7. What action do you want taken to correct the alleged access violation or discrimination?

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8. Is there any other information you want the City to know concerning your grievance?

Signature:

Date:

Signature of (check one)

- ☐ Observer of alleged access violation
- ☐ Victim of alleged discrimination
- ☐ Authorized representative

Submit this form to the ADA Coordinator

Brian D'Amour, P.E.,
Public Works Director, (ADA Coordinator)
630 Garden Street
P.O. Box 1990
Santa Barbara, CA 93102-1990
(805) 564-5378 phone
ADA@santabarbaraca.gov email