Annual LAO Compliance Report for FY 2019-2020 Children and Families Commission

SUMMARY OF COMPLIANCE CHANGES

1.FY 2019-2020

1. Please provide a summary of all language access changes in your Department since FY 2019-2020.

SUMMARY OF COMPLIANCE REPORT CHANGES & KEY BARRIERS

A.Explain changes in strategies and procedures, and indicate whether these changes have improved the Departments language access services from the previous year.

| Description of Change | Improved Language Access Services? |
|--|---------------------------------------|
| Not applicable. We are still in early stages of implementing our Language Access strategies and procedures in accordance with newly developed goals. We will be able to report on this area at the end of FY2020-21. | |
| | |
| | |
| | |

B. Indicate any key barriers that have prevented your Department from achieving your LAO goals and any proposed solutions.

| Barriers | Proposed Solutions |
|--|--|
| Our department has had a delayed start to identifying and implementing our proposed solutions. Our primary barrier is staff awareness and capacity to implement new changes. | We intend to stay in close communication with the OCEIA team to continue to build our understanding of the LAO and corresponding expectations and also fully utilize the resources and information available in the LAO Resource Library to support staff. |

II. DEPARTMENTAL GOALS

2. Assessment of Progress in Meeting Previous Year's Goals

Please provide an update on how your department is meeting your current goals. These are the goals that your department indicated in last year's report.

Not applicable. We are still in early stages of implementing our Language Access strategies and procedures in accordance with newly developed goals. We will be able to report on this area at the end of FY2020-21.

3.Goals for Fiscal Year 2020-2021

Please provide a description of your department's Language Access Ordinance goals for Fiscal Year 2020-2021 (bullet points).

- By November 2020, implement a tracking mechanism to document and track language interpretation at public meetings and events.
- By January 2021, identify all vital documents that are disseminated throughout the course of the fiscal year and review extent to which each are available and translated into multiple languages; by March 2021, develop a plan and corresponding budget to ensure that 100% of vital documents are available in multiple languages by January 2022.
- Ensure that all outgoing messages are provided in English, Spanish, Cantonese, and Mandarin by December 2020; identify available resources to expand translation of outgoing messages by June 2021.
- Identify and draft new Language Access policies for the Department by January 2021; obtain Commission approval to implement new policies by March 2021.
- Ensure all staff are aware of the Language Access Ordinance and new departmental goals by November 2020. By March 2021, provide staff with any training and support they identify as being needed to implement new goals.

III.CLIENT INFORMATION

4. Primary/Preferred Language Information

Do you collect and record primary/preferred language data on clients as part of your intake or application process?

| No | | |
|----|--|--|
| | | |

5. Data Collection Method

What method did you use to determine the number and percentage of limited English proficient (LEP) persons who actually used your department's services citywide during FY 2019-2020?

See OCEIA Guidance, Section I

* You may measure this information by: 1) analyzing information collected during the Department's intake process for all clients; or 2) conducting an annual survey of all contacts with the public made by the Department during a period of at least two weeks; or 3) analyzing and calculating the annual total number of requests for telephonic translation (interpretation) services.

If you use the survey method, please pro-rate your results to produce estimated totals for the full year. For example: data from a two-week survey should be multiplied by 26; data from a one-month survey should be multiplied by 12.

| should | hould be multiplied by 26; data from a one-month survey should be multiplied by 12. | | | | | | |
|--|---|------------------------------------|---------------------------------------|--|--|--|--|
| Pleas | Please provide the method you used to determine the number LEP persons actually served. | | | | | | |
| a. Intake b. Annual Survey c. Number of telephonic interpretation re | | | | | | | |
| | Description (Optional) | Not applicable a not directly serv | as our department does re clients. | | | | |

6. Number of LEP Persons who Used Department's Services During FY 2019-2020

a. Please indicate the number and percentage of LEP persons who actually used your department's services city wide during FY 2019-2020:

See Guidance, Section I

* You may measure this information by: 1) analyzing information collected during the Department's intake process for all clients; or 2) conducting an annual survey of all contacts with the public made by the Department during a period of at least two weeks; or 3) analyzing and calculating the annual total number of requests for telephonic translation (interpretation) services.

If you use the survey method, please pro-rate your results to produce estimated totals for the full year. For example: data from a two-week survey should be multiplied by 26; data from a one-month survey should be multiplied by 12.

| TOTAL CLIENTS | LEP CLIENTS | LEP CLI | ENTS I | BY LANGUA | GE (#) ? | | | |
|---------------|-------------|---------|--------|-----------|----------|-----|------|------------|
| (#) | (#) | CAN | FIL | MDRN | RUS | SPN | VIET | Other |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 Other |

Key: CAN = CantoneseFIL = Filipino (Tagalog)MDRN = MandarinRUS = RussianSPN = SpanishVIET = Vietnamese

Please indicate the number of clients served in other languages:

| LANGUAGE | LEP CLIENTS (#) |
|---|-----------------|
| Not applicable as our department does not directly serve clients. | |
| | |
| | |
| | |

IV. DATA ON TRANSLATION AND INTERPRETATION DURING FY 2019-2020

7. Translated Written Materials

a) Please indicate how many of the Department's materials (e.g. applications, forms, notices of rights, program material, etc.) have been translated into each of the following languages.

See Guidance, Section II (a)

| Language | Total Materials | CHN | FIL | RUS | SPN | VIET | Other #1 (specify) | Description |
|-----------------------------|-----------------|-----|-----|-----|-----|------|-----------------------|-------------|
| All Translated Materials | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Number of Vital Documents | 3 | 3 | 3 | 0 | 3 | 0 | 0 | |

b) Please list all of the Department's written materials(e.g. applications, forms, notices of rights, program material, etc.) that have been translated, the language(s) into which they have been translated, and the persons who have reviewed the translated materials for accuracy and appropriateness.

See Guidance, Section II (a)

Please upload your Translated Materials Log as an Excel file

Your file is uploaded

Download Blank Excel Template

8. Telephone-Based Interpretation Services

Describe any <u>telephone-based interpretation services</u> used for FY 2019-2020 (July 1 through June 30). Please include information on call volumes and language use. If your department uses multiple telephone-based interpretation services, which may include LanguageLine Solutions, other vendors, or internal staff, please indicate each on a separate line.

See Guidance, Section II (b)

| What | | Total Call Volume by Language | | | | | |
|-------------------------------|---------|-------------------------------|--|--|--|--|--|
| telephonic I interpretation (| Total [| | | | | | |
| | | | | | | | |
| | Volume | | | | | | |
| | | | | | | | |

| services were used? | (LEP Clients) | CAN | FIL | MDRN | RUS | SPN | VIET | Other #1 (Specify) | Other #2 (Specify) |
|---|------------------|-----|-----|------|-----|-----|------|-----------------------|-----------------------|
| We do not utilize telephone-based interpretation. | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |

9. In-Person Interpretation Services

How many times did multilingual employees provide in-person interpretation services in FY 2019-2020(July 1 through June 30)? Please include information on the number of times in-person interpretation was provided in each language .

See Guidance, Section II (c)

| | Numl | Number of Times Interpretation Provided, by Language | | | | | | | | |
|-------|------|--|------|-----|-----|------|------|-----------------------|--|--|
| Total | CAN | FIL | MDRN | RUS | SPN | VIET | II I | Other #2 (Specify) | | |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | |

Description (Optional)

We do not typically have in-person translation requests and COVID19 Stay-At-Home Orders further limited any in-person translation.

10. Oral Interpretation at Public Meetings

How often did your department provide oral interpretation at public meetings or hearings during FY 2019-2020? Please indicate the number of meetings/hearings and languages provided and whether vendors or multilingual employees were used.

See Guidance, Section II (d)

| Number of Interpreted hearings/meetings | 32 |
|---|-------------------------|
| Total Number of LEP Attendees | 240 |
| Interpretation provided by | Vendors multilingual |

| | Employees Other |
|--|--|
| Interpretation provided in (languages) | Cantonese Filipino Mandarin Russian Spanish Vietnamese Other |

V.MULTILINGUAL STAFFING AND TRAINING

11. Multilingual Employees

a) How many multilingual public contact employees does your department have, and how many have had their multilingual skills tested and certified by the Department of Human Resources (DHR)? Indicate the language(s) spoken by certified multilingual employees and all multilingual employees.

See Guidance, Section III (a)

| | Total | Number or Multilingual Staff, by Languages | | | | | | |
|--|--------|--|-----|------|-----|-----|------|-------|
| | Number | CAN | FIL | MDRN | RUS | SPN | VIET | Other |
| Certified Multilingual Public Contact Employee | 4 | 1 | | 1 | | 3 | | |
| Total Multilingual Public Contact Employee | | | | | | | | |
| All Public Contact | 4 | | | | | | | |

| Description | $\mathbf{m} (\mathbf{O})$ | ntional) | ۱ (| |
|-------------|---------------------------|----------|-----|--|
| Description | лі (О | puonar | , [| |
| | | | | |

Please provide a roster of your department's Multilingual Employees (excluding those employees who are self-designated as competent in a language other than English). Use additional pages as needed. See Roster of Multilingual Employees from OCEIA.

| ROSTER | ROSTER OF MULTILINGUAL EMPLOYEES | | | | | |
|------------------------------|--|--------------------------------|--------------------------------|----------------------------|--|--|
| Name | Title | Office Location | Languages (other than English) | DHR Certified? (Y/N) | | |
| Winnie Kwei | Community Development Specialist | 1390 Market St., Suite 1100 | Mandarin/Cantonese | Yes | | |
| Jennifer Martinez | Community Development Specialist | 1390 Market St., Suite 1100 | Spanish | Yes | | |
| Teresa M. Garcia | Community Development Specialist | 1390 Market St., Suite 1100 | Spanish | Yes | | |
| Enith Sanchez Fontanez | Program Analyst | 1390 Market St., Suite 1100 | Spanish | Yes | | |

| Please upload your Roster of Multilingual Employees as an Excel file | No file attached Download Blank Excel Template |
|---|---|
|---|---|

b) Assess the number of additional multilingual employees needed in FY 2019-2020 and beyond to meet the requirements of the Language Access Ordinance.

See Guidance, Section III (b)

| Is the current number of multilingual employees adequate to meet LAO requirements? | If no, indicate the number of additional multilingual employees needed and corresponding language(s) |
|--|--|
| Yes | |

If you have indicated that the number of multilingual employees in your Department is inadequate to meet the requirements of the Language Access Ordinance, please state your Department's plans to meet those requirements

12. Employee Development and Training

See Guidance, Section III (c)

a) Which of the following methods does your Department use to verify the quality of multilingual employees' language proficiency skills?

| ✓ | DHR multilingual certification |
|---|--|
| | External certification process |
| | Other method (describe): |
| | Our Department does not have a method to verify the quality of multilingual employees' language proficiency skills |

b) Does your Department offer training for public contact staff on how to provide language assistance services to LEP individuals?

We do not currently offer training, because of the their job title of Community Development Specialist, part of their hiring qualifications was to already have deep skill and experience in community engagement and organizing.

VI.LANGUAGE SERVICE AND COMMUNICATION PROTOCOLS

13. Language Access Policies

Please provide a brief summary of your department's procedures for providing services to LEP persons, using the boxes below.

LANGUAGE ACCESS POLICIES AND PROTOCOLS

| a) Does your department have a written Language Access Policy? | No |
|--|---|
| b) Please provide a brief summary of the policy. | We do not currently have Language Access Policies, but this will be in development for this fiscal year per our recently established LAO goals. |
| c) Please upload your department's full Language Access Policy. | No file attached |
| d) Does your department work with clients in crisis or emergency situations? | No |
| If yes, please describe the nature of crisis or emergency situations (e.g., fire, natural disaster, domestic violence, other). | |

| e) Does your department have a protocol for serving LEP persons in crisis or emergency situations? | No |
|---|----|
| If yes, please provide a brief summary of your Department's protocol for serving LEP persons in crisis or emergency situations, including the use of multilingual staff for assisting LEP persons and the translation of any warning signs. | |

14. Recorded Telephonic Messages

a) Please list any recorded telephonic messages that are available in languages other than English, and describe the content of recorded messages (e.g. office hours and location; information about programs and services; other types of assistance).

| CONTENT OF | | ANGUAGE Mark all boxes that apply) | | | | | | |
|---|-----|---------------------------------------|------|-----|-----|------|----------------|--|
| RECORDED MESSAGE | CAN | FIL | MDRN | RUS | SPN | VIET | Othe (speci | |
| Office Hours and Location | | | | | | | | |
| Information about Programs and Services | | | | | | | | |
| Other (please describe) | | | | | | | | |

b) Assess the availability and quality of your department's recorded telephonic messages in languages other than English .

See Guidance, Section IV (a)

| Needs Improvement |
|-------------------|
|-------------------|

Please explain.

We currently do not have recorded telephonic messages in languages other than English. Per our newly established LAO goals we will be putting steps in place this fiscal year to enhance this component for our

recorded office greeting that has Office Hours, Location, and general information. Information about programs and services is done through our materials and website which will be the focus of our materials translation work in the coming year.

15. Telephonic Requests for Translation or Interpretation Services

a) Describe your Department's procedures for handling telephonic requests for translation or interpretation services.

We triage these requests across our 4 certified multi-lingual staff.

b) Assess the quality of your department's procedures for handling telephonic requests for translation or interpretation services.

See Guidance, Section IV (b)



Please explain.

For a small department we have excellent multi-lingual representation. Our multi-lingual staff are assigned to each of our large community program areas (family support and early care and education) so that we able to cover both content and language expertise across all of our community grant-making activities. We have never received requests to our office for languages other than Spanish and Cantonese/Mandarin.

16. In-Person Requests for Translation or Interpretation Services

a) Describe your Department's procedures for handling in-person requests for translation or interpretation services.

We triage these requests across our 4 certified multi-lingual staff.

b) Assess the quality of your department's procedures for handling in-person requests for translation or interpretation services.

See Guidance, Section IV (c)



Please explain.

For a small department we have excellent multi-lingual representation. Our multi-lingual staff are assigned to each of our large community program areas (family support and early care and education) so that we able to cover both content and language expertise across all of our community grant-making activities. We have never received requests to our office for languages other than Spanish and Cantonese/Mandarin.

17. Public Notices of Availability of Language Access Services

a) For in-person or over-the-counter contacts, please indicate whether there is a notice posted in a public place informing LEP persons of their right to request translation or interpretation, and the languages that this notices is printed in.

Public notice posted informing LEP persons of their right to request language access in the following languages:

| ✓ | Filipino | | |
|---|---|--|--|
| ✓ | Chinese | | |
| ✓ | Russian | | |
| ✓ | Spanish | | |
| ✓ | Vietnamese | | |
| ✓ | Other Amharic, Arabic, Armenian, French, German, Haitian Creole, Hebrew, Hindi, Italian, Japanese, Korean, Polish, Portuguese, Tigrinya, Urdu | | |

b) Assess the quality of your department's public notices of availability of language access services.

See Guidance, Section IV (d)

| Adequate | |
|----------|--|
| | |

Please explain.

We have the standard posted notice in the above languages informing LEP persons of their right to request language access, but our hope is to expand our public notice postings and ensure that staff also know how to respond when languages are requested other than those spoken by our staff.

VII. BUDGET AND EXPENDITURES FOR LANGUAGE SERVICES

18. Language Services Expenditures in FY 2019-2020

Please provide the following information on the annual budget and actual expenses for Language Services provisioning.

See Guidance, Section V (a)

| Language Access Services | FY 2019-2020 Actual Expenses |
|--|------------------------------------|
| Compensatory pay for multilingual employees who perform multilingual services, excluding regular annual salary expenditures. | \$3,060.00 |
| Telephonic interpretation services provided by vendors. | \$0.00 |
| 3. Document translation services provided by vendors. | \$410.00 |
| On-site language interpretation services provided by vendors. | \$0.00 |
| 5. Other costs associated with providing language access services (e.g., grants, special programs, other.) | \$0.00 |
| Total Language Services Budget (add columns 1-5) | \$0.00 |

18 b. Department's Total Operating Budget

\$27,331,172.00

19. Projected Language Services Budget in FY 2020-2021

What is your total projected budget to support progressive implementation of your Department's language service plan in FY 2020-2021?

See Guidance, Section V(b)

| TOTAL 5000 | |
|------------------------|--|
| Description (Optional) | |