

Annual LAO Compliance Report for FY 2019-2020

Human Services Agency (HSA)

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?
Expanding accessibility of our services to non-English speakers by launching the g-Translate feature on our public-facing website, which essentially allows a user to select their preferred language and the entire site	Yes
Remaining diligent in translating communications into multiple languages, including text messages, social media, flyers/posters/fact sheets, letters, etc.	Yes
Tracking analytics on our website to see how users are interacting with the language features	Yes

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

Barriers	Proposed Solutions
COVID 19	Telecommuting, services by appointment, accelerating launch of g-translate.
Closing client service centers	Increased telecommuting and appointments on demand services.

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.

Continue to work with other city Departments, including OCEIA - Ongoing
Continue to track public benefits participation by immigration status - Continuous
Review Bilingual staff certifications and standards - Completed
Improve signage throughout Agency - Ongoing

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).

Continue to foster dynamic working relationships with other city Departments to aid in improving access to services for Limited English Proficient individuals.
Continue to track public benefits participation by immigration status.
Improve signage throughout Agency

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?

Yes

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.

Please provide the method you used to determine the number LEP persons actually served.

- a. ☒ Intake b. ☐ Annual Survey c. ☐ Number of telephonic interpretation requests

Description (Optional)

This information is gathered and recorded at the time of intake/application. Data is obtained from client records. In order to reflect caseloads more accurately January 2020 data was used. Numbers are duplicated across programs.

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 CLIENTS BY LANGUAGE (#) ?						
		CAN	FIL	MDRN	RUS	SPN	VIET	Other
328,661	167,806	83,190	4,541	7,030	8,157	52,287	7,268	5333 Other

Key: CAN = Cantonese

FIL = Filipino (Tagalog)

MDRN = Mandarin

RUS = Russian

SPN = Spanish

VIET = Vietnamese

Please indicate the number of clients served in other languages:

LANGUAGE	LEP CLIENTS (#)
ASL	15
Arabic	786
Armenian	65
Bosnian	9

Cambodian	343
Farsi	115
French	57
Hebrew	5
Hmong	4
Italian	75
Ilocan	12
Indochinese	2
Japanese	86
Korean	1,030
Laotian	55
Mien	8
Polish	12
Portuguese	90
Romanian	12
Samoan	93
Thai	161
Toishanese	4
Turkish	17
Urdu	1
Visaya	2
Other	2,274

b. If you used information from the Intake process (if you checked "a" in #5 above) , please provide a breakdown of the number of LEP persons served at each Covered Department Facility.

LEP CLIENTS BY COVERED DEPARTMENT FACILITY										
Facility Name/ Location	Total Clients Served at Facility (#)	LEP Clients (#)	% LEP	LEP Clients Served at the Facility by Language(#)						
				CAN	FIL	MDRN	RUS	SPN	VIET	Other (specify)
1235 Mission	63,166	28,136	45.00%	17,789	689	1,135	1,941	4,701	1,298	583
1440 Harrison	217,425	118,222	54.00%	55,190	2,743	4,833	3,394	43,983	5,414	2665
170 Otis	9,861	1,648	16.71%	110	19	14	24	1,349	30	64
2 Gough	10,133	2,141	21.12%	711	191	129	160	541	0	409
1650 Mission	25,840	17,463	67.58%	9,390	891	919	2,635	1,652	520	1456
3120 Mission	2,083	166	7.96%	43	8	2	3	60	6	44
1800 Oakdale	124	1	0.80%	0	0	0	0	1	0	0

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	76	49	24	32	61	32	21	Arabic, English, Korean, Armenian, Farsi, Japanese, Samoan
Number of Vital Documents	39	22	9	15	30	14	9	Japanese, Korean, Armenian, Farsi, English

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
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8. Telephone-Based Interpretation Services

Describe any telephone-based interpretation services 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 telephonic interpretation services were used?	Total Call Volume (LEP Clients)	Total Call Volume by Language							
		CAN	FIL	MDRN	RUS	SPN	VIET	Other #1 (Specify)	Other #2 (Specify)
									Korean, Arabic, Mongolian,

Language Line	12,834	1,970	342	539	2,591	4,844	1,263	1,285	Tigrinya, Burmese, Indonesian, Japanese, Urdu, Toishanese, Thai, Amharic, Pashto, Portuguese, Farsi, Hindi, Cambodian, Nepali, Laotian, Punjabi, Turkish, Yemeni, Uzbek, Samoan, Bosnian, Albanian, French, Czech, Hungarian . . .
		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)

Total	Number of Times Interpretation Provided, by Language							
	CAN	FIL	MDRN	RUS	SPN	VIET	Other #1 (Specify)	Other #2 (Specify)
134,246	58,661	4,945		3,710	61,331	5,599		

Description (Optional)

Data for this measure is being pulled from the Agency's Q-Flow system.

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	1,479
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Total Number of LEP Attendees	1,479
Interpretation provided by	<input checked="" type="checkbox"/> Vendors <input type="checkbox"/> multilingual Employees <input type="checkbox"/> Other
Interpretation provided in (languages)	<input checked="" type="checkbox"/> Cantonese <input checked="" type="checkbox"/> Filipino <input checked="" type="checkbox"/> Mandarin <input checked="" type="checkbox"/> Russian <input checked="" type="checkbox"/> Spanish <input checked="" type="checkbox"/> Vietnamese <input checked="" type="checkbox"/> 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	Number or Multilingual Staff, by Languages						
		CAN	FIL	MDRN	RUS	SPN	VIET	Other
Certified Multilingual Public Contact Employee	720	340	71	147	49	375	58	9
Total Multilingual Public Contact Employee	720	340	71	147	49	375	58	9
All Public Contact	1,627							

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Description (Optional)

American Sign Language, Cambodian,
Greek, Japanese & Korean

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 OF MULTILINGUAL EMPLOYEES				
Name	Title	Office Location	Languages (other than English)	DHR Certified? (Y/N)

Please upload your Roster of Multilingual Employees as an Excel file

Your file is uploaded 

[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?

<input checked="checked" type="checkbox"/>	DHR multilingual certification
<input type="checkbox"/>	External certification process
<input type="checkbox"/>	Other method (describe):
<input type="checkbox"/>	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?

Yes


New employee orientation includes information about being culturally competent and resources available for interpretation and translation services. Information regarding how to access translation/interpretation services is made available on the Agency's

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 ?	Yes
b) Please provide a brief summary of the policy.	The Agency does not have one policy across the entire Agency; however, it does have extensive protocols for supporting individuals that are limited English proficient. The protocols allow for individuals to self-identify and staff to record primary language preference/. The protocols also include how to access interpretation/translation services as well as sets parameters for who can act as an acceptable interpreter for an individual/family.
c) Please upload your department's full Language Access Policy.	Your file is uploaded 
d) Does your department work with clients in	

crisis or emergency situations ?	Yes
If yes, please describe the nature of crisis or emergency situations (e.g., fire, natural disaster, domestic violence, other).	other
e) Does your department have a protocol for serving LEP persons in crisis or emergency situations?	Yes
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.	Given the nature of HSA's services, our policies, procedures and protocols for serving persons with LEP in a crisis, in general, does not differ from our non-emergency policies, procedures and protocols. However, some critical support programs do have specific policies and procedures for individuals/families in crisis due to a disaster (ie. CalFresh, IHSS, APS and FCS).

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 RECORDED MESSAGE	LANGUAGE (Mark all boxes that apply)							Other (specify)
	CAN	FIL	MDRN	RUS	SPN	VIET		
Office Hours and Location	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Information about Programs and Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Other (please describe) FAQ	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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

See Guidance, Section IV (a)

Adequate

Please explain.

The main HSA programs continue to provide telephonic messages in the threshold languages. In addition to the basic hours, locations and programmatic information, there is also a FAQ portions as well.

15. Telephonic Requests for Translation or Interpretation Services

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

Detailed information for accessing telephonic interpretation assistance through Language Line are posted on the Agency's intranet. In addition, staff are oriented to available language access services during their orientation.

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

See Guidance, Section IV (b)

Adequate

Please explain.

Language Line usage appears to be integrated into our business practices and consistently used throughout the Agency.

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.

Request for in person translation/interpretation services are coordinated through FISA's Office of Civil Rights. Detailed information for accessing these services are posted on the Agency's intranet. In addition, staff are oriented to available language a

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

See Guidance, Section IV (c)

Adequate

Please explain.

Based upon the consistent utilization of these services, it appears that staff understand the procedures for accessing these services.

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:

<input checked="" type="checkbox"/>	Filipino
<input checked="" type="checkbox"/>	Chinese
<input checked="" type="checkbox"/>	Russian
<input checked="" type="checkbox"/>	Spanish
<input checked="" type="checkbox"/>	Vietnamese
<input type="checkbox"/>	Other

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

See Guidance, Section IV (d)

Excellent

Please explain.

Translated signage is posted in all waiting rooms notifying clients of language access services. In addition, there are "I Speak" indicator cards at service counters to aid staff in identifying individual's primary language.

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
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	Expenses
1. Compensatory pay for multilingual employees who perform multilingual services, excluding regular annual salary expenditures.	\$1,075,640.00
2. Telephonic interpretation services provided by vendors.	\$62,266.53
3. Document translation services provided by vendors.	\$63,795.71
4. On-site language interpretation services provided by vendors.	\$358,011.06
5. Other costs associated with providing language access services (e.g., grants, special programs, other.)	\$0.00
6. Total Language Services Budget (add columns 1-5)	\$1,559,713.30

18 b. Department's Total Operating Budget

\$1,075,337,178.00

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	557000.00
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Description (Optional)

The projected budget for language services only reflects contracted services.
