

CF OPERATING PROCEDURE
NO. 60-16

STATE OF FLORIDA
DEPARTMENT OF
CHILDREN AND FAMILIES
TALLAHASSEE, June 3, 2022

Human Resources

METHODS OF ADMINISTRATION FOR FEDERAL FINANCIAL PARTICIPATION

This operating procedure provides processes and instructions to ensure non-discrimination in all programs and activities of the Department of Children and Families receiving or that are supported by federal financial assistance or are otherwise required by law to ensure nondiscrimination and equal opportunity in service delivery.

BY DIRECTION OF THE SECRETARY:

(Signed original copy on file)

SHELBY JEFFERSON
Human Resources Director

SUMMARY OF REVISED, ADDED, OR DELETED MATERIAL

This operating procedure is part of a complete rewrite of Civil Right Procedures related to customer/customer service and supersedes all previous versions of CFOP 60-16 and Chapters 3 and 4 of CFOP 60-10.

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Chapter 1

GENERAL

1-1. Purpose. This procedure describes the Department's Method of Administration to ensure nondiscrimination and equal opportunity in service delivery in accordance with state and federal laws.

1-2. Scope. The policies and procedures prescribed in this operating procedure apply to all Department sponsored programs and activities involved in providing services to customers or potential customers.

1-3. Policy. The Department of Children and Families complies with all state and federal Civil Rights statutes, regulations, directives, and guidance.

a. The Department assures to each job applicant and employee an equal employment opportunity without regard to race, color, sex, or sexual orientation, gender or gender identity, pregnancy, religion, national origin, age, genetic information, political opinion or affiliations, military status, parental status, marital status, family status, disability or handicap, acquired immune deficiency syndrome (AIDS), AIDS-Related Complex, or human immunodeficiency virus (HIV), except as provided by law or when such requirements constitute a bona fide occupational qualification necessary to perform the essential tasks associated with the position.

b. The Department assures to each applicant or participant equal access to programs, benefits, services, and activities without regard to a protected basis such as, race, color, national origin, sex, sexual orientation, gender or gender identity, religion, disability, age, political beliefs, marital status, parental status, or family status. Not all protected bases apply to all public benefit programs.

c. No individual with a disability shall, on the basis of disability, be excluded from participation in or be denied the benefits of services, programs, or activities of the Department and its local agencies and contractors and have an equal opportunity to participate in the most integrated setting in all Department and Contractor programs and activities.

d. No person shall be subjected to retaliation, harassment, intimidation, threats, coercion for making a charge, testifying, assisting, or participating in any manner in an investigation, proceeding or hearing, or for making a complaint or participating in the investigation of an alleged unlawful discriminatory practice prohibited by state or federal law.

1-4. Authority. See Appendix A of this operating procedure.

1-5. Responsibilities of the Department. The Department must:

a. Provide services in a manner that affords all individuals an equal opportunity to participate in programs, benefits and services, and activities.

b. Provide effective public notice of program availability, program rights and responsibilities, the policy of nondiscrimination, and the procedure for filing a complaint.

c. Provide reasonable accommodation to qualified individuals with disabilities who are clients, employees, or employment applicants with the Department, unless to do so would cause undue hardship. This will ensure that qualified individuals with a disability have an equal opportunity to obtain the same result, to gain the same benefit, or to reach the same level of achievement, in the most appropriate integrated setting as that provided to others. In determining whether a particular aid or service would result in undue financial and administrative burdens, DCF takes into consideration the cost of the aid or service in light of all resources available to fund the program, service, or activity and the effect on other expenses or operations. The decision that a particular aid or service may result in an

undue burden or fundamental alteration must be made by DCF Secretary or designee and must be accompanied by a written statement of the reasons for reaching that conclusion. DCF still must ensure services are provided to the maximum extent possible.

d. Make reasonable modifications in policies, practices, or procedures when the modifications are necessary to avoid discrimination on the basis of disability, unless the Department or any state or local government with which it contracts (public entity) can demonstrate that making the modifications would fundamentally alter the nature of the service, program, or activity.

e. Ensure equally effective communication through the availability and use of auxiliary aids or services free of charge to allow individuals with a disability the opportunity to participate in programs, activities, services, and benefits.

f. Notify individuals with a disability in a language or alternate format that they can understand about the availability of free auxiliary aids and services or other reasonable modifications and provide these accommodations upon request and when necessary to ensure equal access to programs, activities, services, and benefits.

g. Ensure physical accessibility for individuals with a disability to locations where the Department's services are provided and to program websites, online automated systems, and digital platforms.

h. Take reasonable steps to ensure meaningful access to limited English proficient individuals (LEP) to programs, benefits, services, and activities.

i. Notify customers in their preferred language of their right to receive qualified, competent language assistance services free of charge and how to request these services.

j. Offer and provide qualified, competent language assistance services at no cost to individuals who are LEP to ensure meaningful access to programs, activities, services, and benefits.

k. Translate vital documents and information into languages spoken by LEP customers. Vital documents are generally documents that affect access to, retention in, or termination or exclusion from the Department's program services or benefits.

l. Ensure accessibility to vital information on websites, automated online services, and customer service telephone voice mail menus for individuals with LEP.

m. Maintain race and ethnicity data showing the numbers of each race and ethnic group participating in programs and activities.

n. Complete required Civil Rights training.

o. Submit Civil Rights compliance review reports and checklists.

p. Keep confidential and refer Civil Rights complaints to the Department's Human Resources Administrator for Civil Rights in a timely manner not later than 24 hours after receipt.

q. Adhere to all Civil Rights requirements of federal/state agreements and Civil Rights written assurances.

r. Require inclusion of Civil Rights requirements in all agreements or contracts.

s. Record and track Civil Rights access data at each contact, including, but not limited to, assistance requested, and type of service provided (i.e., language, auxiliary aids and services, or other reasonable modifications when rendered).

t. Implement immediate steps to resolve matters of noncompliance with the requirements of the Department and applicable federal Civil Rights statutes and regulations.

1-6. Assignment of Civil Rights Compliance Responsibilities. Compliance with this operating procedure will be as follows:

a. **The Office of Civil Rights**.

(1) Title VII – Employment.

(a) Is responsible for the intake and investigations of all employment discrimination complaints filed by employees and applicants. Employees and applicants may file employment discrimination complaints internally with the Office of Civil Rights or externally with the Florida Commission on Human Relations or the Equal Employment Opportunity Commission.

(b) Conduct onsite and management reviews.

(c) Post selection monitoring.

(d) Develop and implement the affirmative action program.

(2) Title VI – Service Delivery.

(a) Ensure that the department and its service providers are providing equally accessible and equally effective services to eligible customers by conducting compliance reviews and monitoring.

(b) Is responsible for intake and investigations of service delivery complaints of discrimination filed by customers, potential customers, family members, advocacy groups, etc. The complaints may be filed internally with the DCF Office of Civil Rights or externally with the U.S. Department of Agriculture, Food and Nutrition Services – Office of Civil Rights; U.S. Department of Health and Human Services – Office of Civil Rights; or the U.S. Department of Justice, Civil Rights Division - Federal Coordination and Compliance Section. Discrimination complaints filed in SNAP must be investigated and processed in accordance with the USDA FNS Instruction 113-1.

(c) Develop Corrective Action Plans.

(3) Health Insurance Portability Accountability Act (HIPAA).

(a) Conduct yearly compliance reviews.

(b) Investigate complaints alleging violation of Privacy. Complaints may be filed internally with the DCF Office of Civil Rights or externally with the Department of Health and Human Services – Office for Civil Rights.

(c) Assist with the development of Privacy Training.

b. **Community Partner Liaisons, Contract Managers, SNAP Outreach Specialists**.

(1) Abide by the Methods of Administration.

(2) Forward all complaints of discrimination to the DCF Office of Civil Rights on the date of receipt or the next business day of operation.

(3) Keep Civil Rights complaints confidential and separate from program complaints.

(4) Collect and process the Civil Rights Compliance Checklist from Providers (form CF 946, available in DCF Forms) within 30 days of entering into any contract or agreement and then annually thereafter. Forward Civil Rights Compliance Checklists to the DCF Office of Civil Rights.

(5) Monitor Provider records to verify that staff receive Civil Rights training to include LEP and reasonable modifications/auxiliary aids and services requirements training.

(6) Monitor Provider agencies to verify that they notify the public about the availability of free communication assistance and reasonable modifications and how to request assistance in a language and alternative format that individuals with LEP and individuals with disabilities can understand. Additionally, monitor Provider agencies to verify that they have access to qualified language assistance services, translated materials, and to qualified and appropriate auxiliary aids and services and that they are utilizing these resources at each point of service for individuals with LEP and responding appropriately to requests for reasonable modifications and auxiliary aids and services for individuals with disabilities. Notify the DCF Office of Civil Rights if monitoring reveals any area of noncompliance.

(7) Complete a Civil Rights Limited Scope Review during onsite monitoring visits (see Appendix C of this operating procedure). Report any area of noncompliance to the DCF Office of Civil Rights.

(8) Attend annual Civil Rights training in accordance with federal program directives.

c. Department Employees and Providers having contact with customers or companions are expected to:

(1) Abide by the Methods of Administration.

(2) Identify the communication assistance needs of customers or companions with LEP to ensure meaningful access to all Department programs and services.

(3) Identify the communication assistance needs of customers or companions with a disability to ensure equally effective communication through the provision of necessary auxiliary aids or services when accessing Department programs or activities.

(4) Make reasonable modifications in policies, practices, and procedures when necessary to ensure individual with a disability have an equal opportunity to participate in Department programs and activities.

(5) Document and report the identified communication assistance or reasonable modification needs for customers or companions with a disability.

(6) Provide appropriate auxiliary aid or service or reasonable modification.

(7) Notify agencies to which referrals are made of the need for language assistance services for LEP individuals or of the need for auxiliary aids or services and reasonable modifications for individuals with a disability.

Chapter 2

DISSEMINATION OF INFORMATION

2-1. General. The Department will provide notification of its compliance responsibilities to participants, potential participants, applicants, employees, providers, and their subcontractors. The Department will appropriately post the non-discrimination policy.

2-2. Procedures for Notification.

a. Availability of Civil Rights Information. DCF provides notice of civil rights information in the following documents:

(1) Civil Rights Non-Discrimination Poster.

(2) Section 504/ADA Public Notification Poster.

(3) Communications Assistance Poster.

(4) Limited English Proficient Poster.

(5) Multilingual Tagline Poster.

(6) "I Speak" Poster.

(7) "And Justice for All" Poster – to obtain this poster contact the Economic Self-Sufficiency Program Office.

(8) USDA Nondiscrimination Statement for SNAP.

(9) Other DCF Posters, Pamphlets, and Brochures.

(10) CF Pamphlet 60-1, Employee Handbook.

(11) CFOP 60-15, Equal Employment Opportunity/Affirmative Action.

(12) CFOP 60-16, Methods of Administration For Federal Financial Participation.

(13) CFOP 60-17, Health Insurance Portability and Accountability Act.

b. Hard copies of documents can be obtained from the Office of Civil Rights at:

Department of Children and Families
Office of Civil Rights
2415 North Monroe Street
Suite 400
Tallahassee, FL 32303-4190
850-487-1901

c. Displaying and Posting of Civil Rights Documents and Information. The above documents and information must be displayed or posted, as applicable, in all department-owned or department-leased buildings, in buildings owned or leased by Department or its Providers, in areas within the buildings that are intended or designated for access to the general public and posted on web pages, online services, and digital platforms accessible to the general public.

d. Additional information about civil rights is in the Department's equal opportunity policy statement, the non-discrimination policy, the program guides and mental health treatment facilities' guides for providing communication assistance, auxiliary aids and services, reasonable modifications in programs and services, LEP guidance,¹ the USDA SNAP Nondiscrimination Statement, and the USDA And Justice for All Poster.

e. The following full joint USDA-HHS nondiscrimination statement must be included in all publications intended for public dissemination that cover both USDA SNAP and HHS programs, including websites, pamphlets, posters, brochures, etc. The nondiscrimination statement for SNAP-only publications can be found at <https://www.fns.usda.gov/civil-rights/usda-nondiscrimination-statement-snap-fdpir>. Additionally, both joint and SNAP-only applications should include **"Do Not Send Applications Here"** above and below the nondiscrimination statement:

In accordance with federal civil rights laws and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex (including gender identity and sexual orientation), religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Programs that receive federal financial assistance from the U.S. Department of Health and Human Services (HHS), such as Temporary Assistance for Needy Families (TANF), and programs HHS directly operates are also prohibited from discrimination under federal civil rights laws and HHS regulations.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language) should contact the agency (state or local) where they applied for benefits. Individuals who are deaf, hard of hearing, or who have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

CIVIL RIGHTS COMPLAINTS INVOLVING USDA PROGRAMS

USDA provides federal financial assistance for many food security and hunger reduction programs such as the Supplemental Nutrition Assistance Program (SNAP), the Food Distribution Program on Indian Reservations (FDPIR), and others. To file a program complaint of discrimination, complete the [Program Discrimination Complaint Form](#) (AD-3027) (found online at: [How to File a Complaint](#), and at any USDA office) or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

1. **Mail:** Food and Nutrition Service, USDA,
1320 Braddock Place, Room 334, Alexandria, VA 22314; or,
2. **Fax:** (833) 256-1665 or (202) 690-7442; or,
3. **Phone:** (833) 620-1071; or,
4. **Email:** FNSCIVILRIGHTSCOMPLAINTS@usda.gov.

For any other information regarding SNAP issues, persons should either contact the USDA SNAP hotline number at (800) 221-5689, which is also in Spanish, or call the [state information/hotline numbers](#) (click the link for a listing of hotline numbers by state) found online at [SNAP hotline](#).

CIVIL RIGHTS COMPLAINTS INVOLVING HHS PROGRAMS

HHS provides federal financial assistance for many programs to enhance health and well-being, including TANF, Head Start, the Low Income Home Energy Assistance Program (LIHEAP), and others. If you believe that you have been discriminated against because of your race, color,

¹ 67 Fed. Reg. 41455 (June 18, 2002), 68 Fed. Reg. 47311 (Aug. 8, 2003), and 79 Fed. Reg. Vol. 79, 70771 (November 28, 2014)

national origin, disability, age, sex (including pregnancy, sexual orientation, and gender identity), or religion in programs or activities that HHS directly operates or to which HHS provides federal financial assistance, you may file a complaint with the Office for Civil Rights (OCR) for yourself or for someone else.

To file a complaint of discrimination for yourself or someone else regarding a program receiving federal financial assistance through HHS, complete the form online through OCR's Complaint Portal at <https://ocrportal.hhs.gov/ocr/>. You may also contact OCR via mail at Centralized Case Management Operations, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Room 509F HHH Bldg., Washington, D.C. 20201; Fax: (202) 619-3818; or email OCRmail@hhs.gov. For faster processing, we encourage you to use the OCR online portal to file complaints rather than filing via mail. Persons who need assistance with filing a civil rights complaint can email OCR at OCRMail@hhs.gov or call OCR toll-free at 1-800-368-1019, or TDD 1-800-537-7697. For persons who are deaf, hard of hearing, or have speech difficulties, please dial 7-1-1 to access telecommunications relay services. We also provide alternative formats (such as Braille and large print), auxiliary aids, and language assistance services free of charge for filing a complaint.

This institution is an equal opportunity provider.

f. For the USDA Nondiscrimination Statement, Recipients should have a legitimate business reason for using the short statement. Not having enough room on a pamphlet or brochure is not a valid reason especially if the material informs the public, applicants, or participants about the program, how to apply for benefits, or if an adverse action will be taken. For flyers and other program materials, use of the appropriate nondiscrimination statement depends on the information being conveyed. At a minimum, include the following short statement and any required federal statement in print no smaller than the other text:

"This institution is an equal opportunity provider."

g. All advertisements for public meetings, public training sessions, etc. must notify attendees and participants of the Department's obligation to accommodate individuals with a disability and to provide meaningful access to individuals who are Limited English Proficient. Example wording:

If you will have difficulty participating in this event because you do not read, write, or speak English well or have a disability, free language assistance, aids or services and reasonable modifications are available upon request. Please contact the *(insert contact person)* at *(insert contact person phone number)* or *(insert contact person e-mail address)* *(insert #)* days before the event to request assistance. Individuals who are Deaf, Hard of Hearing, Deaf/Blind, or Speech Disabled can call the SPOC by first calling the Florida Relay Service at 711.

h. Members of the general public who have a disability affecting their mobility in ways that interfere with their ability to use Entry ways and Exit ways accessible by persons who do not have a disability affecting their mobility must be redirected to an alternative service or exit route in a



reasonable manner. The international symbol of accessibility must be used at each accessible entrance and exit.

i. Anyone who believes that they are subjected to unlawful discrimination may file a complaint of discrimination with the Department of Children and Families by contacting:

Office of Civil Rights
 Department of Children and Families
 2415 North Monroe Street
 Suite 400
 Tallahassee, Florida 32303-4190
 Tel: (850) 487-1901
 Fax: (850) 921-8470
 TDD: (850) 922-9220

j. Alternatively, anyone who believes that they are subjected to unlawful discrimination may file a complaint with the appropriate federal agency:

U.S. Department of Agriculture
 Office of the Assistance Secretary for Civil Rights
 1400 Independence Avenue, SW, Stop 9410
 Washington, DC 20250-9410
 (202) 260-1026 (local)
 (866) 632-9992 (toll-free)
 (800) 877-8339 (local or federal relay)
 (800) 845-6136 (Spanish relay)
 (202) 690-7442 (fax)

program.intake@usda.gov

<https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf> (English)

<https://www.usda.gov/sites/default/files/documents/USDAProgramComplaintForm-Spanish-Section508Compliant.pdf>

U.S. Department of Health and Human Services (HHS)
 Office for Civil Rights
 200 Independence Avenue, SW
 Room 509F, HHH Building
 Washington, DC 20201
 (800) 368-1019 (toll-free)
 (800) 537-7697 (TDD toll-free)

ocrmail@hhs.gov

https://ocrportal.hhs.gov/ocr/cp/wizard_cp.jsf

U.S. Department of Justice (DOJ)
 Civil Rights Division
 Office of the Assistant Attorney General
 950 Pennsylvania Avenue, N.W.
 Washington, D.C. 20530
 (202) 514-4609 (voice)
 (202) 514-0716 (TDD)
 (202) 307-1197 (Fax)

<https://www.justice.gov/crt/how-file-complaint>

2-3. Equal Opportunity Message. When photographic and other graphics are used to provide program or program-related information, the Department's message of equal opportunity shall be conveyed.

Chapter 3

PLAN FOR REASONABLE MODIFICATIONS AND AUXILIARY AIDS AND SERVICES
FOR INDIVIDUALS WITH A DISABILITY

3-1. General. No individual with a disability shall, on the basis of disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of the Department and its Providers.

a. This chapter sets forth requirements for providing reasonable modifications in policies, practices, and procedures when necessary to ensure individuals with a disability have an equal opportunity to participate in the most integrated setting in all Department and Provider programs and activities. This plan also includes providing the appropriate auxiliary aids and services to ensure equally effective communication for applicants, participants, members of the public and companions with communication disabilities (i.e., vision, hearing, or speech disabilities).

b. In addition to this plan, the Department and its Providers must develop local guides to aid staff in providing reasonable modification and auxiliary aids and services for individuals with a disability.

3-2. Authority.

a. Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. 794 et seq. at 7 CFR 15b (USDA) and 45 CFR 84 (HHS).

b. Title II of the Americans with Disabilities Act (ADA) of 1990, 42 U.S.C. §§ 12131–12134 et seq., as amended by the ADA Amendments Act of 2008 (ADA Amendments Act), Public Law 110–325, 122 Stat. 3553 (2008) at 28 CFR 35 (ADAAA).

c. Title III of the Americans with Disabilities Act of 1990 (42 U.S.C. 12181–12189), as amended by the ADA Amendments Act of 2008 (ADA Amendments Act), Public Law 110–325, 122 Stat. 3553 (2008) at 28 CFR 36 (ADAAA).

3-3. Definitions. The definition of an individual with a disability follows below. Other definitions of the terms used in this operating procedure may be found in the Glossary of Terms in Appendix B of this operating procedure.

a. An Individual with a Disability is defined as one who:

(1) Has a physical or mental impairment that substantially limits one or more of such person's major life activities;

(2) Has a record of such an impairment; or,

(3) Is regarded as having such impairment.

b. Physical or Mental Impairment.

(1) Means:

(a) Any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems, such as neurological, musculoskeletal, special sense organs, respiratory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, immune, circulatory, hemic, lymphatic, skin, and endocrine; or;

(b) Any mental or psychological disorder, such as intellectual disability, organic brain syndrome, emotional or mental illness and specific learning disabilities.

(2) Includes, but is not limited to, contagious and noncontagious diseases and conditions such as the following: orthopedic, visual, speech, and hearing impairments, and cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, intellectual disability, emotional illness, dyslexia and other specific learning disabilities, Attention Deficit Hyperactivity Disorder, Human Immunodeficiency Virus infection (whether symptomatic or asymptomatic), tuberculosis, drug addiction, and alcoholism.

(3) Physical or mental impairment does not include homosexuality or bisexuality.

c. Major Life Activities. Major life activities include, but are not limited to:

(1) Caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, sitting, reaching, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, writing, communicating, interacting with others, and working; and,

(2) Major bodily function, such as the functions of the immune system, special sense organs and skin, normal cell growth, and digestive, genitourinary, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, hemic, lymphatic, musculoskeletal, and reproductive systems. Major bodily function includes the operation of an individual organ within a body system.

d. Has a Record of Such an Impairment. Has a history of or has been classified (or misclassified) as having, a mental or physical impairment that substantially limits one or more major life activities.

e. Is Regarded as Having Such an Impairment.

(1) Except as set forth in paragraph e(2) below, an individual is “regarded as having such an impairment” if the individual is subjected to a prohibited action because of an actual or perceived physical or mental impairment, whether or not that impairment substantially limits, or is perceived to substantially limit, a major life activity, even if the public entity asserts, or may or does ultimately establish, a defense to the action prohibited by the ADA.

(2) An individual is not “regarded as having such an impairment” if the public entity demonstrates that the impairment is, objectively, both “transitory” and “minor.” A public entity may not defeat “regarded as” coverage of an individual simply by demonstrating that it subjectively believed the impairment was transitory and minor; rather, the public entity must demonstrate that the impairment is (in the case of an actual impairment) or would be (in the case of a perceived impairment), objectively, both “transitory” and “minor.” For purposes of this section, “transitory” is defined as lasting or expected to last six months or less.

(3) Establishing that an individual is “regarded as having such an impairment” does not, by itself, establish liability. Liability is established under Title II of the ADA only when an individual proves that a public entity discriminated on the basis of disability within the meaning of Title II of the ADA, 42 U.S.C. 12131–12134.

f. Qualified Individual with a Disability. With respect to customer service, means an individual with a disability who, with or without reasonable modifications to rules, policies or practices, the removal of architectural, communication or transportation barriers or the provision of auxiliary aids and services, meets the essential eligibility requirements for the receipt of services or participation in programs, benefits, services, or activities provided by the Department and its Providers of customer services.

3-4. Policy. It is the policy of the Department to afford qualified individuals with a disability an equal opportunity to participate in the Department's services, programs, benefits, and activities by making reasonable modifications in policies, practices and procedures and providing auxiliary aids and services, when necessary to prevent discrimination on the basis of disability. A reasonable modification is a change or alteration that provides individual with a disability an opportunity to participate in or benefit from an aid, activity, or service that is equal to that afforded others. Reasonable modifications may be needed, but are not limited to:

- a. During the application process and in procedures notifying beneficiaries of their rights,
- b. In the nature and requirements of programs, and,
- c. In policies and procedures to help customers sustain program participation.

3-5. Development of Reasonable Modifications and Auxiliary Aids and Services Policies and Procedures.

a. The Department and its Providers must develop policies and procedures that ensure individuals with a disability are provided with an equal opportunity to participate and are provided with equally effective communication when accessing Department programs, benefits, activities, and services.

b. The Office of Civil Rights must review this procedure annually. The Office of Civil Rights will update this procedure if needed and notify the Assistant Secretary for the program, Mental Health Treatment Facility Administrators and Single Point of Contacts (SPOCs) of any changes.

c. Local-level resource guides must be reviewed annually by Assistant Secretaries or Mental Health Treatment Facility Administrators, Provider Executive Leaders or their designee, and any updates submitted to the designated Civil Rights Officer by April 15 of each year. The Civil Rights Officer must be notified when the review has been completed even if no updates are required.

3-6. Roles and Responsibilities. The Human Resource Administrator for Civil Rights is the designated Section 504 and Americans with Disabilities Act (ADA) Officer. The Civil Rights Officers are designated as their ADA/Section 504 Coordinators.

a. Civil Rights Officers serve as Section 504/ADA Coordinators and report to the Human Resource Administrator for Civil Rights. Together, they ensure the Department follows laws governing the ADAAA and Section 504 of the Rehabilitation Act which includes, but is not limited to, consulting with Single Points of Contact (SPOCs), Community Partner Liaisons (CPLS), and SNAP Outreach Specialists for delivering services to customers or companions who are individuals with a disability. In addition, the ADA/Section 504 Coordinators ensure the provision of auxiliary aids and services for customers or companions with a disability as follows, where applicable or and when necessary to ensure equally effective communication:

(1) Disseminating specific guidelines to ensure the Department follows the ADAAA and Section 504;

(2) Conducting the required self-evaluation of the Department's current services, policies, and practices, and the effects thereof, that do not or may not meet the requirements of Section 504 or the ADAAA and make the necessary modifications [28 CFR 35.105];

(3) Analyzing data collected in the Customer or Companion Reasonable Modification Assessment and Auxiliary Aid/Service Record (form CF 761, available in DCF Forms) and implementing any corrective action plan, if warranted;

(4) Answering questions and providing appropriate assistance regarding immediate access to and proper use of appropriate auxiliary aids and services required by the ADA and Section 504;

(5) Identifying qualified sign language interpreters and other auxiliary aids and services;

(6) Keeping abreast of new technology and resources for ensuring effective communication with individuals with a disability;

(7) Communicating with each SPOC concerning services to customers or companions with a disability, at least once a quarter; and,

(8) Providing a quarterly summary of all such communication to the Human Resources Administrator for Civil Rights.

b. Single Points of Contact (SPOC) ensure the department and its Providers are equipped with the resources and training necessary to ensure equally effective communication with customers or companions with a disability and ensure that all staff document auxiliary aids and services delivered to individuals with a disability. SPOCs manage service records and report this data and any resource and/or training needs to their designated ADA/Section 504 Coordinator. SPOC's will:

(1) Communicate with the Section 504/ADA Coordinator (Civil Rights Officer) concerning an individual with a disability.

(2) Ensure that all personnel within a specific direct service facility have the resources necessary to ensure they provide equal access to services to individuals with a disability who are customers or their companions.

(3) Ensure that Staff document reasonable modification or auxiliary aids and services delivered to individuals with a disability who are customers or their companions.

(4) Manage customer service records and provide relevant information and data to the Section 504/ADA Coordinator using the appropriate electronic or computer database(s) or program(s). Reports are submitted electronically in Form Site via https://fs16.formsite.com/DCFTraining/Monthly-Summary-Report/form_login.html.

NOTE: An Auxiliary Aid and Service Record Monthly Summary Report is included in Appendix D of this operating procedure. This form is not required but may be used to compile data before entering the data into the electronic database.

(5) Report resource and/or training needs to the Section 504/ADA Coordinator.

3-7. Medical Concerns. Nothing in this operating procedure shall require the use of electronic device or equipment constituting an appropriate auxiliary aid or service when or where its use may interfere with medical or monitoring equipment or may otherwise constitute a threat to any customer's medical condition. If Department or Provider staff determines that use of an auxiliary aid or service interferes with medical or monitoring equipment or constitutes a threat to a customer's medical condition, Department or Provider staff shall provide alternative means to provide reasonable modification or to ensure effective communication with the customer or companion and document the alternative means in the customer's case file or medical record.

3-8. Equally Effective Communication Requirements. The Department and its Providers must provide auxiliary aids and services, including sign language interpreters, when necessary to ensure communications with individuals with a disability are as effective as communication with others. This

requirement may be met by contracted qualified and certified interpreters, video remote interpreting or other necessary auxiliary aids and services.

a. Primary Consideration Rule for Public Entities (State or Local Governments).

(1) The Department and any Provider that is a state or local government (public entity) with which the Department contracts must give primary consideration to the type of auxiliary aid or service requested by the person with the disability. Staff must honor that choice, unless they can demonstrate that another equally effective means of communication is available or that the aid or service requested would fundamentally alter the nature of the program, service, or activity or would result in undue financial and administrative burdens.

(2) If the choice expressed by the person with a disability would result in an undue burden or a fundamental alteration, a public entity still has an obligation to provide another aid or service that provides effective communication, if possible. The DCF Secretary, or designee, will make the final decision regarding any request that may represent an undue financial or administrative burden. The decision that a particular aid or service would result in an undue burden must include a written statement of the reasons for reaching that conclusion. The HR Administrator for Civil Rights will act as the facilitator.

b. Consultation Requirement for Providers. Providers that are nongovernmental entities that contract with the Department to provide patient/customer services, programs, benefits or activities should consult with the person with a disability whenever possible to discuss what aid or service is appropriate. These entities must provide an aid or service that will be effective, given the nature of what is being communicated and the person's method of communicating, unless doing so would result in an undue burden. In which case, the entity must provide another effective aid or service that would not result in an undue burden if possible.

d. Equally Effective Communication for Companions. The Department and Providers must provide necessary auxiliary aids and services to ensure equally effective communication for companions with a disability. The term "companion" includes any family member, friend, or associate of a person seeking or receiving an entity's goods or services who is an appropriate person with whom the entity should communicate.

e. Family, Friends and Children as Interpreters. The Department and Providers cannot require a person to bring someone to interpret for him or her. A covered entity can rely on a companion to interpret in only two situations.

(1) In an emergency involving an imminent threat to the safety or welfare of an individual or the public, an adult or minor child accompanying a person who uses sign language may be relied upon to interpret or facilitate communication only when a qualified interpreter is not available.

(2) In situations not involving an imminent threat, an adult accompanying someone who uses sign language may be relied upon to interpret or facilitate communication when:

(a) The individual requests this;

(b) The accompanying adult agrees; and,

(c) Reliance on the accompanying adult is appropriate under the circumstances. This exception does not apply to minor children.

(3) Even under exception (2) above, covered entities may not rely on an accompanying adult to interpret when there is reason to doubt the person's impartiality or effectiveness.

3-9 Auxiliary Aids and Services.

a. In addition to scheduled appointments, these aids and services must be available for emergencies and walk-ins.

b. The key to deciding what aid or service is needed to communicate effectively is to consider the nature, length, complexity, and context of the communication as well as the person's normal method(s) of communication. The range of communications options include, but are not limited to:

(1) For persons who are deaf or hard of hearing include, the Florida Relay Service, TDDs (Telecommunication Devices for the Deaf), FAX (Telephone Facsimile Transmittal), certified CART (Communication Access Real Time Translation) providers, VRS (Video Relay Service), phone amplifiers, cell phone texting, certified or qualified interpreters, qualified note taker, cued-speech interpreter, flash cards, lip-reading, written notes, supplementary hearing devices, charts, signs, or a combination of these, as appropriate.

(2) For persons who have a speech disability, speech to speech translation, transliteration, alternative and augmentative communications systems, sign language interpreters, written materials, TTY/TDD, cell phone texting, email, charts, signs, or a combination of these or other methods, as appropriate.

(3) For persons who have a vision disability, qualified reader, large print, Braille, audio recording, telephone relay, computer screen reading program, or a combination of these or other methods, as appropriate.

(4) For individuals with mobility impairments such as manual dexterity impairments, the use of key guards, or alternative input devices such as speech recognition, speech output, trackball, joystick, touch screen, larger button phones, ergonomic tools, or writing aids.

(5) For individuals with cognitive impairments, pictures, symbols or diagrams instead of words, reading of written information, providing audio tapes, voice output on computer, allowing verbal response to questions, typed instead of handwritten responses, forms with ample spacing, or providing checklists.

(6) Traditional Relay Service (text only) through a TTY or via the Internet.

(7) Video Relay Service (VRS) using a videophone with a sign language interpreter. This service is for phone calls only per FCC regulations and may not be used when the customer is in the presence of staff.

3-10. Contracting for Qualified and Certified Interpreters.

a. Regions/Circuits/ Mental Health Treatment Facility/Program Offices designated staff are responsible for determining the cost-effective means of obtaining interpreter services. Qualified interpreters or certified American Sign Language interpreters may be secured by hiring full or part-time staff or contracting with individuals or agencies.

b. Providers are responsible for arranging for interpreter services, which includes identifying and scheduling qualified or certified interpreters. A Mental Health Treatment Facility and Program Offices have the option of allowing Providers to use the Department's contracted interpreters.

c. Allowable costs in interpreter contracts include the interpreting fee, administrative costs, and travel. Contracts should include provisions for reimbursement for mileage from the point of origin (office or home). Travel reimbursement rate may not exceed the current state rates.

d. It is standard in the profession for single assignments to be made in half-hour increments for a minimum of two hours. Any contract written for interpreter services should include a cancellation clause. The parties may negotiate an appropriate penalty payment, up to the full assignment fee, if the Department fails to cancel within the time specified. Care should be taken to clearly define the intent and any circumstances under which fees will or will not be paid to the interpreter, such as, if the interpreter fails to keep an appointment.

e. Individuals providing interpreter services for customers and companions will complete a Sign Language Interpreter Information Sheet (form CF 1596, available in DCF Forms) before serving as an interpreter for the Department.

f. Each Program Office and Facility will designate staff to be responsible for payment of all interpreter services, arranging for qualified or certified interpreters and maintaining an application file for interpreters who serve the Department's customers and companions.

g. Any interpreter's repeated failure to appear shall result in termination of their contract or removal from the list of interpreters used by the Department.

3-11. Certified and Qualified Interpreters.

a. Certified American Sign Language interpreters must hold current certification by the Registry of Interpreters (RID) or the National Association of Deaf (NAD) and will be required to provide proof of certification upon demand. The interpreter must be certified to function in the appropriate settings. The interpreter is expected to abide by the RID Code of Ethics. This code presents the standards of ethical practice including an emphasis on confidentiality, privacy, impartiality, accuracy, non-paternalism, and the continual development of skill. All contract language shall ensure that Provider agencies utilize only certified interpreters.

b. Qualified Interpreter means an interpreter who, via an on-site appearance or a video remote interpreting (VRI) service, is able to interpret effectively, accurately, and impartially, both receptively and expressively, using any specialized terminology necessary for effective communication with an individual who is deaf or hard of hearing or who has a speech impairment.

(1) The term qualified interpreter includes, for example, sign language interpreters, oral translators, and cued-language translators or other interpreters.

(2) Not all interpreters are qualified for all situations. For example, an interpreter who is qualified to interpret using American Sign Language (ASL) is not necessarily qualified to interpret orally. In addition, someone who has only a rudimentary familiarity with sign language or finger spelling is not a "qualified sign language interpreter." Likewise, someone who is fluent in sign language but who does not possess the ability to process spoken communication into the proper signs or to observe someone signing and translate their signed or finger-spelled communication into spoken words is not a qualified sign language interpreter.

(3) An interpreter who knows tactile interpreting may be the only interpreter who is qualified to interpret for someone who is both deaf and blind. Although an interpreter may be certified, a certified interpreter is not necessarily "qualified." Similarly, certification is not always required for an interpreter to be "qualified." Family members may not be qualified due to confidentiality concerns.

c. A DCF Qualified Interpreter is an employee who has been designated as a qualified interpreter and is able to interpret completely, accurately, impartially, and effectively, both receptively and expressively, using any specialized terminology necessary for effective communication with a customer or companion who is deaf or hard of hearing. DCF employee sign language interpreters must be evaluated and determined to be qualified before they can interpret for customers or companions.

d. After independent evaluation of relevant staff, DCF Program Offices may use staff who have rudimentary familiarity with sign language or finger spelling to communicate with customers and/or companions who are deaf or hard of hearing in limited situations involving relatively simple face-to-face conversations with minimal interactive communication such as when providing written brochures, filling out admission forms, directing customers or companions to a particular area of the facility or the general information.

e. Contracted video remote interpreting services (VRI) that use video conference technology over high-speed internet lines. VRI interpreter must be a qualified interpreter.

(1) Staff must be trained to ensure competency with VRI technology.

(2) Equipment must meet all the ADAAA performance standards, including, but not limited to, providing high-quality, clear, delay-free, motion-free video and audio so that transmission of voices is clear and easily understood and video provides sufficiently large and sharply delineated picture of the interpreter's and customer's or companion's heads, hands and fingers regardless of the body position of the customer or companion in accordance with 28 CFR 35.160(d).

3-12. Ensuring Equally Effective Communication.

a. Auxiliary aids or services for communication, will be provided within two (2) hours of request. If the situation is not an emergency, staff shall offer to schedule an appointment by the next business day and provide an interpreter at the appointment where necessary for effective communication. Delaying services is not always practical or appropriate. Therefore, alternative services will be provided when advance notice for a specifically requested auxiliary aid or service is not given. For areas with limited interpreter resources, an alternative plan for providing effective communication should be developed prior to need, for example, Video Remote Interpreting.

b. The Department and its Providers are required to notify applicants with disabilities of their right to free reasonable modifications and auxiliary aids and services in a format that they can understand.

c. The use of auxiliary aids and services will be free of charge to the customer or companion and may be required to ensure effective communication even if the individual with a disability declines the use of auxiliary aids or services.

3-13. Fundamental Alteration/Undue Burden.

a. The Department and its Providers are not required to modify its policies, practices, or procedures if it can demonstrate that making the modification would fundamentally alter the nature of the service, benefit, program, or activity. If the modification requested would cause undue financial burden on the program or activity to the level that it would make continued operation of the program unfeasible, the modification need not be provided. However, denying a modification(s) under the fundamental alteration exception should not result in the denial of access to the program or other benefits or services.

b. In determining whether a particular aid or service would result in undue financial and administrative burdens, each entity should take into consideration the cost of the particular aid or service in light of all resources available to fund the program, service, or activity and the effect on other expenses or operations. The decision that a particular aid or service would result in an undue burden or fundamental alteration must be made by the head of each agency and must be accompanied by a written statement of the reasons for reaching that conclusion. Each agency still must ensure services are provided to the maximum extent possible.

3-14. Needs Assessment and Providing Section 504/ADA Modification.

a. Determining the most effective reasonable modification or communication method begins with asking the customer/companion what they prefer. An assessment of the customer/companion's need should be completed for individuals with a disability. The assessment shall be completed when the Department or Provider staff first become aware of the possible need for reasonable modification or communication assistance. If appropriate, interview the customer/companion's assigned caseworkers, counselors, parents, family members, guardians or other representatives concerning the most effective method of modification or communication with the customer. The assessment shall be documented in the customer's case file or medical chart and shall take into account all relevant facts and circumstances, including the following:

- (1) The nature, length, and importance of the communication at the time a need is identified;
- (2) The individual's communication abilities;
- (3) The individual's health status or changes for those seeking health services; and,
- (4) The number of people involved in the communication.

b. Customer files must be documented to indicate whether a reasonable modification or auxiliary aid or service is needed, and outside referral sources must be notified in advance of a customer's or companion's needs. For scheduled events, staff shall make sure a qualified or certified interpreter, or certified CART provider or other aid is available at the time of the scheduled appointment. If a scheduled interpreter fails to appear, staff shall take whatever steps are necessary to obtain a qualified or certified interpreter or other aid within 2 hours. Customers, once identified as requiring a reasonable modification or an auxiliary aid or service shall not require future needs assessments, unless there is a change in need.

(1) Staff will follow the local-level resource guide provided by the Single Point of Contact (SPOC) to secure the assistance required and the estimated wait time. Staff shall provide updates to the customer or companion as necessary until the assistance is secured.

(2) Between the time an auxiliary aid or service is requested and the time it is provided, staff shall continue to try to communicate with the customer or companion insofar as the customer or companion seeks to communicate. In such circumstances, staff shall use all available methods of communication, including, but not limited to, written communication, note-takers, sign language pictograph, or other communication graphics. Telling the customer and/or companion of efforts to secure the needed communication assistance does not lessen the Department's obligation to provide assistance timely.

c. If the individual declines the use of an auxiliary aid or service, the Department and its Providers still must ensure effective communication is occurring and that the program or service is provided in the most integrated setting.

d. Staff shall never require or coerce a family member, advocate, school or Mental Health Treatment Facility personnel, or friend of a customer or companion to interpret or facilitate communication between staff and the customer or companion. In critical, time-sensitive, life-threatening situations, staff may rely upon communication through such individuals until a qualified or certified interpreter is obtained. In such situations staff shall retain detailed, written documentation in the individual's file. The customer has a right to wait for a qualified or certified interpreter if they feel the communication is not effective.

e. Persons with multiple communication disabilities or who have a communication disability and are also limited English proficient will require consideration of all aspects of communication needs.

f. The interpreter's responsibility is to facilitate communication between the customer or companion and the Department or Provider. The interpreter shall maintain confidentiality, privacy, impartiality, accuracy, and non-paternalism. Interpreters may not be tasked with assisting customers with filling out paperwork or other tasks that are normally handled by program staff.

g. Staff shall take all reasonable measures to ensure that the customer keeps appointments for which interpreter services have been arranged.

h. If communication is not effective or if the nature of the communication changes significantly after the initial communication assessment, Department or Provider staff shall reassess which appropriate auxiliary aids or services are necessary for effective communication.

i. The Department and its Providers shall notify, in advance, all agencies to which it refers customers and companions for additional services of the person's requested auxiliary aid or service. Staff shall document their records to reflect the notification to the referral agency of the customer or companion's requested auxiliary aid or service.

j. Department or Provider staff shall provide appropriate auxiliary aids and services to customers or companions who have a disability during the entire period of time of the visit and during subsequent visits without requiring subsequent requests for the appropriate auxiliary aids and services by the customer or companion.

(1) During the initial assessment in the state Mental Health Treatment Facility, treatment centers, and any other facility where customers have numerous communications of varying length and complexity, Department or Provider staff shall develop a reasonable modification and auxiliary aids and services/or communication plan using the Customer or Companion Reasonable Modification Assessment and Auxiliary Aid Service Record (form CF 761, available in DCF Forms) to identify all reasonably foreseeable situations and the anticipated method of providing reasonable modification or communication with the customer or companion who is an individual with a disability during the time of ongoing services.

(2) All Department staff or Provider staff that typically interacts with the customer or companion shall be involved in developing the ongoing plan or shall be made aware of the results of the assessments and how to ensure reasonable modification and effective communication with the customer or companion

(3) Ask or assist the customer or companion to voluntarily complete the Free Reasonable Modification and Communication Assistance for Individuals with a Disability (form CF 763, available in DCF Forms). If the customer or companion is unable or refuses to complete this form, complete this form on their behalf by identifying their requested reasonable modification or auxiliary aid or service using an alternative method. For customers or companions with a disability who may have difficulty understanding or completing CF 763, the Department or Provider staff shall offer assistance, including interpreter services where necessary.

(a) Indicate what type of reasonable modification or communication assistance is being requested, or,

(b) Indicate whether the Customer or Companion declines free reasonable modification or communication assistance.

(4) The signed form CF 763 will be maintained in the customer's case file or medical chart.

(5) Waiver of free reasonable modification or auxiliary aid or service by the customer or companion does not relieve the Department or its Provider from providing effective communication or reasonable modification to ensure services are provided in the most integrated setting.

k. Complete the Customer or Companion Reasonable Modification Assessment and Auxiliary Aid/Service Record (form CF 761, available in DCF Forms) or the Call Center Customer or Companion Reasonable Modification Assessment and Auxiliary Aid/Service Record (form CF 761A, available in DCF Forms) and determine the reasonable modification or method of communication that is most effective for the customer or companion. A record of the customer/companion identified need will be documented and maintained in the customer's file. In a conspicuous location, electronic files will contain alerts or notes that the customer or companion requires a reasonable modification or auxiliary aid or service and refer to the completed CF 761, CF 761A, or CF 763.

(1) Provide a copy of the completed CF 761, CF 761A, or CF 763 to the SPOC.

(2) When a reasonable modification and auxiliary aid and service plan is completed, all sections of the reassessment of the customer or companion's need is not required at each contact. However, **at each contact the type of reasonable modification or auxiliary aid or service provided must be documented** in the customer file or record and the Header, Section 1 and Section 3 of form CF 761 must be completed and a copy given to the SPOC.

(3) If an ongoing plan is not completed, CF 761, CF 761A or CF 763 must be completed for each customer or companion contact and the reasonable modification or auxiliary aid provided must be documented in the customer's file or record at each contact. A copy of the CF 761, CF 761A or CF 763 must be provided to the SPOC.

(4) In the event that the reasonable modification or auxiliary aid or service is not effective or if the nature of the service needs or communication changes significantly after the initial assessment, Department or Provider staff shall re-assess which appropriate auxiliary aids and services are necessary for effective delivery of services. This shall be accomplished, where possible, in consultation with the person seeking a reasonable modification or auxiliary aids or services. Prior to finalizing the change, the SPOC must be notified of the change and the reason for changing the customer's initial assessment.

(5) Denials may only be made by the Secretary or designee, or the Provider's Executive Director/CEO or designee after a determination that the modification or auxiliary aid or service requested would result in an undue burden or a fundamental alteration of the program, service, or activity.

(a) Complete the Customer or Companion Reasonable Modification Assessment and Auxiliary Aid/Service Record documenting the date and time of the denial, the name and title of the Director or Administrator who made the determination and the basis of the determination (Section 5 of CF 761). This information must be recorded in the customer's file. A copy of the CF 761 or CF 761A must be provided to the SPOC.

(b) Advise the person making the request of the denial of the requested aid and provide the individual with a copy of the Customer or Companion Reasonable Modification Assessment and Auxiliary Aid/Service Record indicating the denial.

(c) Ensure effective modification or auxiliary aid or service with the Customer or Companion and will advise the person making the request for an aid of the alternative aid or service that will be provided and must document the customer's file or record to reflect the alternative aid provided in section 2 of CF 761.

NOTE: If you are unfamiliar with the auxiliary aid or service requested contact your Single Point of Contact (SPOC), or Supervisor, for assistance in locating appropriate resources to ensure equal access for customers and companions. The SPOC will contact the 504/ADA Coordinator (Civil Rights Officer) for assistance when needed.

3-15. Requesting Feedback from Customers and/or Companions.

a. Provide a Customer or Companion Feedback form (form CF 744, available in DCF Forms) to each customer or companion with a known disability, regardless if they are requesting or have been given an accommodation. The purpose of the Customer or Companion Feedback form is to collect data on the effectiveness and appropriateness of the reasonable modification or auxiliary aid and service provided and to ensure that equal access has been provided. Information regarding the Customer or Companion Feedback form shall be made available in alternative formats, English, Spanish, and Creole. Other languages will be made available upon request.

b. The customer or companion is not required to complete the form but may choose to provide feedback when given the opportunity. The customer is free to take the form and mail it on their own. They should not be told they must give the form to the service provider. They should be provided an envelope they can seal before handing it back to the service provider. Tell the customer or companion that completion of the form is voluntary and will not affect access to benefits.

c. For customers or companions with a disability who may have difficulty understanding or completing the feedback form, the Department or service provider staff shall offer assistance, including interpreter services where necessary.

d. The Customer or Companion Feedback forms shall be retained by the DCF Office of Civil Rights for monitoring and self-assessment purposes.

e. Show the customer or companion the Contact the Department form on myflfamilies.com under Services-Individual with a Disability in the drop-down "What can DCF do for me?" if the individual would prefer to send their feedback via email.

3-16. Program Accessibility. The Department and its Providers shall provide equally effective and equally accessible services to an individual with a disability in accordance with federal and state statutes and program requirements. The Department and its Providers shall operate programs and activities in a manner so that when viewed in their entirety, each program or activity is readily accessible to individuals with disabilities. The Department and its Providers will provide equal access to services to a qualified individual with a disability unless the proposed modification would result in an undue burden or a fundamental alteration in the program, benefit, activity, or service. While the services are not required to produce identical results or levels of achievement for persons with a disability, the service must offer persons with a disability equal opportunity to obtain the same results, to gain the same benefit, or to reach the same level of achievement by providing reasonable modifications in the most integrated setting appropriate to the individual's needs. Examples of reasonable modifications include but are not limited to the following:

a. A person who has an intellectual or cognitive disability may need assistance in completing an application for public benefits.

b. A person who uses crutches may have difficulty waiting in a long line. The Department is not required to move the person to the front of the line (although this would be permissible) but staff must provide a chair and note where the individual is in line so he or she does not lose his or her place.

c. A location that does not allow people to bring food into its facility may need to make an exception for a person who has diabetes and needs to eat frequently to control their glucose level.

d. A location that prohibits animals in public places must allow service animals except where the dog's presence would create a legitimate safety risk (such as compromise a sterile environment such as a burn treatment unit) or would fundamentally alter the nature of a public entity's service.

e. People with mobility, circulatory, or respiratory disabilities use a variety of devices for mobility. Some use walkers, canes, crutches, or braces while others use manual or power wheelchairs or electric scooters, all of which are primarily designed for use by people with disabilities. Public entities must allow people with disabilities who use these devices into all areas where the public can go.

3-17. Architectural Accessibility. The Department will not select a site or location for a facility with the effect of excluding individuals from, denying them benefits of, or subjecting them to discrimination under any program, service, benefit, or activity based on disability. The Department and its Providers are not required to make each facility or every part of a facility accessible to and usable by persons with a disability; nor are they required to make structural changes in existing facilities where other methods are effective in achieving compliance. The Department and its Providers may comply with accessibility requirements by alternative means such as redesign or acquisition of equipment, reassignment of services to accessible buildings, assignment of aides to beneficiaries, home visits, delivery of services at alternative accessible sites, alteration of existing facilities and construction of new facilities, use of accessible rolling stock or other conveyances, or any other methods that result in making its services, programs or activities readily accessible to and usable by individual with a disability. However, in choosing among available methods, the Department and its Providers must give priority to those methods that offer programs to persons with disabilities in the most integrated setting appropriate.

a. Prior to any new construction or alterations of a facility the Department and its Providers will ensure that the new construction or alterations of an existing facility meet the requirements of the current Section 504 and 2010 ADA Accessibility Standards.

(1) The Department and its Providers shall, within six months of the publication of this policy, evaluate its current services, policies and practices, and the effects thereof, to determine if they meet the requirements of this part and, to the extent modification of any such services, policies, and practices is required, the Department and its Providers shall develop a plan to make the necessary modifications.

(2) The Department and its Providers shall provide an opportunity to interested persons, including individual with a disability or organizations representing individual with a disability, to participate in the self-evaluation process by submitting comments.

(3) The Department and its Providers that employ 50 or more persons shall, for at least three years following completion of the self-evaluation, maintain on file and make available for public inspection:

(a) A list of the interested persons consulted;

(b) A description of areas examined, and any problems identified; and,

(c) A description of any modifications made.

(4) If the Department or its Providers have already complied with the self-evaluation requirement of a regulation implementing Section 504 of the Rehabilitation Act of 1973, then the requirements of this section shall apply only to those policies and practices that were not included in the previous self-evaluation.

b. The Department and its Providers shall provide signage at all inaccessible entrances to each of its facilities, directing users to an accessible entrance or to a location at which they can obtain information about accessible facilities. The international symbol for accessibility shall be used at each accessible entrance to a facility.

c. Except for isolated or temporary interruptions in service or access due to maintenance or repairs, the Department and its Providers shall maintain in operable working condition those features of facilities and equipment that are required to be readily accessible to and usable by persons with disabilities.

3-18. Wheelchairs, Mobility Aids and Other Power-Driven Mobility Devices. The Department shall not ask an individual using a wheelchair or other power-driven mobility device questions about the nature and extent of the individual's disability.

a. The Department and its Providers must allow people with disabilities who use manual or power wheelchairs or scooters, and manually powered mobility aids such as walkers, crutches, and canes into all areas where members of the public are allowed to go.

b. The use of other types of power-driven devices by people with disabilities in public areas must be allowed unless the entity can demonstrate that the device cannot be accommodated because of legitimate safety requirements based on actual risk and not just on speculation or stereotypes about a particular class of devices or how individuals will operate them. Public entities must consider these factors in determining whether to permit other power-driven mobility devices on their premises:

(1) The type, size, weight, dimensions, and speed of the device;

(2) the volume of pedestrian traffic;

(3) The facility's design and operational characteristics, such as its square footage, whether it is indoors or outdoors, the placement of stationary equipment, devices, or furniture, and whether it has storage space for the device if requested by the individual;

(4) Whether legitimate safety standards can be established to permit the safe operation of the device; and,

(5) Whether the use of the device creates a substantial risk of serious harm to the environment or natural or cultural resources or poses a conflict with Federal land management laws and regulations or poses a conflict with Federal land management laws and regulations.

c. Inquiry into use of Other Power-Driven Mobility Device (OPDMD). The Department and its Providers may ask a person using an OPDMD to provide a credible assurance that the mobility device is required because of the person's disability. The Department and its Providers shall accept the presentation of a valid, State-issued, disability parking placard or card, or other State-issued proof of disability as a credible assurance that the use of the OPDMD is for the individual's mobility disability. In lieu of a valid, State-issued disability parking placard or card, or State-issued proof of disability, the Department and its Providers shall accept as a credible assurance a verbal representation, not contradicted by observable fact, that the OPDMD is being used for a mobility disability. A "valid" disability placard or card is one that is presented by the individual to whom it was issued and is otherwise in compliance with the State of issuance's requirements for disability placards or cards.

3-19. Service Animals.

a. An individual with a disability has the right to be accompanied by a service animal in all areas of a public entity's facility that the public or customers are normally permitted to occupy.

b. Service animal means any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability (28 CFR §35.104). Other species of animals, whether wild or domestic, trained, or untrained, are not service animals for the purpose of this definition.

c. The work of tasks performed by a service animal must be directly related to the individual's disability. Examples of work or task include, but are not limited to, assisting individuals who are blind or have low vision with navigation and other tasks, alerting individuals who are deaf or hard of hearing to the presence of people or sounds, providing non-violent protection or rescue work, pulling a wheelchair, assisting an individual during a seizure, alerting individuals to the presence of allergens, retrieving items such as medicine or the telephone, providing physical support and assistance with balance and stability to individuals with mobility disabilities, and helping persons with psychiatric and neurological disabilities by preventing or interrupting impulsive or destructive behaviors. The crime deterrent effects of an animal's presence and the provision of emotional support, well-being, comfort, or companionship do not constitute work or tasks for the purpose of this definition.

NOTE: Section 413.08, F.S. provides a slightly different definition for service animal.

d. The service animal must be under the control of its handler and must have a harness, leash, or other tether, unless either the handler is unable because of a disability to use a harness, leash, or other tether, or the use of the harness, leash, or other tether would interfere with the service animal's safe, effective performance of work or tasks, in which case the service animal must be otherwise under the handler's control by means of voice control, signals, or other effective means.

e. Documentation that the service animal is trained is not a precondition for providing service to an individual accompanied by a service animal. A public entity may not ask about the nature or extent of an individual's disability, require medical documentation, require a special identification card, or ask that the dog demonstrate its ability to perform the work or task. To determine the difference between a service animal and a pet, a public entity may ask if an animal is a service animal required because of a disability and what work or tasks the animal has been trained to perform. Generally, a public entity may not make these inquiries about a service animal when it is clear that an animal is trained to do work or perform tasks for an individual with a disability (e.g., the dog is observed assisting with stability or balance to an individual with an observable mobility disability).

f. The Department and its Providers may exclude or remove any animal from the premises, including a service animal, if the animal is out of control and the animal's handler does not take effective action to control it, the animal is not housebroken, or the animal's behavior poses a direct threat to the health and safety of others.

g. When there is a legitimate reason to ask that a service animal be removed, Department and its Providers staff must offer the person with the disability the opportunity to obtain goods or services without the animal's presence.

h. The care or supervision of a service animal is the responsibility of the individual owner. The Department and its Providers are not required to provide care or food or a special location for the service animal or assistance with removing animal excrement.

i. An individual with a disability may be permitted to be accompanied by their service animals in all areas of the Department or its Providers' facilities where members of the public, participants in services, benefits, programs, or activities, or invites, as relevant, can go.

j. The Department and its Providers may not impose a deposit or surcharge on an individual with a disability as a precondition to permitting a service animal to accompany the individual with a disability, even if a deposit is routinely required for pets.

3-20. Miniature Horse. The Department and its Providers shall make reasonable modifications in policies, practices, or procedures to permit the use of a miniature horse by an individual with a disability if the miniature horse has been individually trained to do work or perform tasks for the benefit of the individual with a disability. When determining whether reasonable modifications can be made to allow a miniature horse into a specific facility, the Department and its Providers shall consider:

a. The type, size, and weight of the miniature horse and whether the facility can accommodate these features;

b. Whether the handler has enough control of the miniature horse;

c. Whether the miniature horse is housebroken; and,

d. Whether the miniature horse's presence in a specific facility compromises legitimate safety requirements that are necessary for safe operation.

e. The requirements for service animals listed in paragraphs 3-19c through j also apply to miniature horses.

3-21. Interference with Use or Training of Service Animal.

a. Any trainer of a service animal, while engaged in the training of such an animal, has the same rights and privileges with respect to access to public facilities and the same liability for damage as is provided for those persons accompanied by service animals.

b. Any person, firm, or corporation, or the agent of any person, firm, or corporation, who denies or interferes with admittance to, or enjoyment of, a public accommodation or with regard to a public accommodation, otherwise interferes with the rights of an individual with a disability or the trainer of a service animal while engaged in the training of such an animal commits a misdemeanor of the second degree in accordance with section 413.08, F.S.

NOTE: In section 413.08, F.S., a miniature horse is included as a service animal.

Chapter 4

LIMITED ENGLISH PROFICIENT PLAN

4-1. General. This chapter establishes program policies, procedures, and standards and provides instruction to Department personnel when providing services to and interacting with limited English proficient (LEP) individuals. This chapter clarifies existing legal requirements and procedures that the Department and all Providers must meet to serve LEP persons in a manner that is consistent with Title VI of the Civil Rights Act of 1964 and its implementing regulations. This chapter applies to all programs, benefits, services, and activities administered by the Department, as well as to entities, organizations, or individuals administering or providing Department programs, benefits, or services, or that receives federal financial assistance through the Department, whether as a recipient or subrecipient.

4-2. Authority. Section 601 of Title VI of the Civil Rights Act of 1964, 42 U.S.C. 2000d et seq., provides that no person shall "...on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance." The Department receives federal financial assistance from several federal agencies. Therefore, the Department must ensure that it takes reasonable steps to provide meaningful access to all limited English proficient persons. The intent of this chapter is to ensure that the Department complies with Federal laws and regulations that prohibit national origin discrimination and govern language access for LEP individuals.

a. The relevant legal provisions include:

- (1) Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C. §§2000d et seq.
- (2) Food Stamp Act of 2008, as amended, 7 U.S.C. §§ 2011 et seq.
- (3) Civil Rights Restoration Act of 1987, P.L. 100-259.
- (4) 28 Code of Federal Regulations (CFR) Part 42, Subpart C.
- (5) 45 CFR Parts 80 and 92.
- (6) 7 CFR Parts 15 and 272 (emphasis 272.4(b)).

b. Federal funding agencies have also developed guidance for recipients of Federal financial assistance which details the obligation under Title VI and its implementing regulations to ensure that LEP individuals have meaningful access to participate in federally assisted programs or activities.²

4-3. Language Access Policy. It is the policy of the Department to take reasonable steps to provide LEP individuals with meaningful access to the benefits, services, information, programs, and activities administered by the Department at no cost to the LEP person and to provide communications between the Department and the LEP person that are not impaired as a result of a language barrier. The

² U.S. Department of Justice, Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons, 67 Fed. Reg. 41,455, 41,457 (June 18, 2002) (DOJ LEP Guidance); U.S. Department of Agriculture, Guidance to Federal Financial Assistance Regarding the Title VI Prohibition Against National Origin Discrimination Affecting Persons with Limited English Proficiency, 79 Fed. Reg. 70771, (Nov. 28, 2014) (USDA LEP Guidance); U.S. Department of Health and Human Services, Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons, 68 Fed. Reg. 47,311, 47,313 (Aug. 8, 2003) (HHS LEP Guidance).

Department and its Provider must take reasonable steps to effectively inform the public of language assistance services available to them, free of charge, to allow meaningful access to DCF programs, benefits, services, and activities.

4-4. Language Diversity Self-Assessment. The Department and its Providers are required to take reasonable steps to ensure meaningful access to the Department's programs, services, and activities for individuals with LEP. For planning purposes and to determine the mix of language assistance services required to ensure meaningful access, the Department's Office for Civil Rights will routinely conduct a self-assessment analysis that considers the diversity of languages spoken by individuals with LEP within the local service area who may access the Department's programs and activities. The process the Department will use is the Four Factor Analysis as outlined in Appendix F of this operating procedure.

4-5. Departmental Language Needs.

a. The Department encourages each program to review county-level LEP information about the number and percentage of LEP persons in their area to better tailor resources to community needs.

(1) According to the American Community Survey's (ACS) multi-year data for 2010-2014, the top languages spoken at home by LEP persons aged 5 years or over in Florida are Spanish, French Creole (including Haitian Creole), Vietnamese, Portuguese, and Chinese (including both Mandarin and Cantonese).

(2) Historic usage of FL DCF programs and activities indicates the Department serves a variety of LEP persons. It is important to note that the LEP population often varies by region or county.

(3) Demographic information can be found by reviewing school data, Census data or visiting U.S. Department of Justice's Language Map App, which is incorporated by reference into this plan. Programs may also consult with community agencies/organizations, legal aid entities, and others who may assist in the identification of populations underserved because of language barriers.

b. Programs should also examine past experiences with LEP encounters to determine the breath and scope of language services needed.

4-6. Coordination of the Department's Language Access Policy and Procedures.

a. The Human Resources Administrator for Civil Rights (HRACR) is the Department's Designated Title VI Officer and Limited English Proficient (LEP) Coordinator. This official is responsible for the development, implementation and coordination of Department policies, procedures, and protocols to ensure the non-discriminatory delivery of services or benefits in programs administered by the Department or its Providers. As the Department's designated LEP Coordinator, this official has primary responsibility for development, monitoring, oversight and investigating compliance with the Department's Language Access Procedure. The contact information for this position is:

Human Resources Administrator for Civil Rights
Florida Department of Children and Families
2415 North Monroe Street
Suite 400
Tallahassee, Florida 32303-4190
(850) 487-1901

b. The Civil Rights Officer will serve as a program's primary point of contact for compliance with Title VI and the Department's Language Access Procedure.

c. The HRACR will periodically assess the effectiveness of Department and Program language assistance services by, among other things, conducting an inventory of languages most frequently encountered, identifying the primary channels of contact with LEP community members (whether telephonic, in person, correspondence, web-based, etc.), reviewing Department, Program, and/or Provider programs and activities for language accessibility, reviewing Program plans and protocols, monitoring for Civil Rights compliance, reviewing the annual cost of translation and interpreter services, and consulting with outside stakeholders.

4-7. Identifying LEP Individuals Who Need Language Assistance. Department and Provider staff at the point of first contact with an LEP individual should make an initial assessment of the need for language assistance services and should obtain such services if they are needed to effectively communicate with the individual. An assessment of whether an individual is LEP can be done in one of the following ways:

- a. Self-identification by the non-English speaker, LEP individual or companion;
- b. Reviewing records of past Department interactions with the individual to determine whether an interpreter or translator was used;
- c. Asking open-ended questions to determine whether the individual understands or can accurately respond in English;
- d. Asking a multilingual staff, qualified interpreter, or telephone interpreter to verify an individual's primary language;
- e. Asking the individual if he or she can speak the English language and his or her primary language; or,
- f. Using the "I Speak" language identification poster or card (see Appendix E of this operating procedure).

4-8. Notifying LEP Individuals about the Availability of Language Assistance Services.

a. The Department and its Providers must take reasonable steps to inform LEP persons about the availability of free language assistance services in a language that they can understand. At a minimum, the Department must provide notice to LEP persons of the availability of free language access services through:

- (1) Oral communication by staff at the point of contact;
- (2) The Department's home webpage, specific programmatic webpages and any related online platform;
- (3) The automated telephone answering systems; within or accompanying vital documents in English only; and,
- (4) Posters or signage placed in entry ways or areas where the initial contact with the LEP person is likely to occur.

b. The Department may also consider providing notice through program brochures, program-related education videos, booklets, local newspapers (including non-English newspapers), job fair leaflets, radio/television announcements, and other forms of outreach. Regardless of the form of public notice used, notice of availability of free language access services must be given in the appropriate language(s).

4-9. Provision of Language Assistance Services.

a. Department staff may communicate with LEP persons through translation, interpretation, or direct in-language communication. Communication may take the form of the written word, audio or video announcements and instruction, automated telephone system, or live in-person or telephone communication. Quality and accuracy of the language assistance service provided by the Department are critical to avoid serious consequences to the LEP person and to the Department. The Department should ensure that all multilingual staff or contracted personnel who serve as translators, interpreters or who communicate “in-language” with LEP persons:

(1) Demonstrate proficiency in and ability to communicate information accurately in both English and in the other language (e.g., third-party language assessment);

(2) Identify and employ the appropriate mode of interpreting (e.g., consecutive, simultaneous, or sight translation), translating, and can communicate fluently in the target language;

(3) Have knowledge in both languages of any specialized terms or concepts peculiar to the FL DCF program or activity and of any particularized vocabulary used by the LEP person;

(4) Understand and follow confidentiality, impartiality, and ethical rules to the same extent as Department staff; and

(5) Understand and adhere to their role as interpreters, translators, or multilingual staff.

b. The Department and its Providers using multilingual employees must obtain a formal third-party assessment of the multilingual employee’s capacity to speak, read, write, and understand the non-English language. The Third-Party Assessment of multilingual employees will assess for proficiency in English and the other language (Appendix G of this operating procedure):

(1) Tier I – Speaking, Reading, and Listening; and,

(2) Tier II – Writing, Translation, and Interpretation.

c. Family members (including minor children <18 years old), neighbors, friends, acquaintances, and bystanders should not be used to provide interpretation services. Using family, friends, or bystanders to interpret could result in a breach of confidentiality, a conflict of interest, or inadequate interpretation. Relatives, friends, acquaintances, or neighbors can be used to inquire as to the primary language of the LEP person. After identifying an LEP person’s language needs, a multilingual employee or contracted interpreter can be used to explain that free language services are available.

4-10. Declining Use of Free Language Assistance.

a. The LEP person may decline the free language assistance services because they would rather use a trusted friend or family member to interpret. Department employees must note in their client or electronic record that free language assistance services were offered and that the offer was declined. This must be communicated to the LEP individual in a language he or she understands. Department staff may also use a qualified interpreter, in person, via video or telephonically, to communicate with the LEP individual.

b. In cases where precise, complete, and accurate interpretations or translation of information and or testimony are critical, or there are indications that the LEP person’s informal interpreter is not competent, Department staff must use a qualified interpreter, in person, via video or telephonically, to communicate with the LEP individual.

4-11. Contracting for Interpreters.

a. The Contractor shall supply interpreters in the languages specified by the Department who possess a minimum of two (2) years of experience in all phases of language interpretation. Interpreters must be independently assessed in interpretation skills with passing scores (defined as ILR scores of 2+ or equivalent) on language/interpretation tests.³ Federal, State or the National Association of Judiciary Interpreters and Translators (NAJIT) Judiciary Interpreters and Translators Certification Examination (JITCE) certification will be accepted. A qualified Interpreter must:

(1) Be knowledgeable of both English and foreign language vocabularies typically used in formal, consultative, and casual modes of communication in social service contexts, including colloquial slang, idiosyncratic slang, and regionalism;

(2) Be knowledgeable of specialized vocabulary (terminology) in both English and the foreign language related to the Department's varied roles and missions, particularly for Department components with greater interactions with limited English proficient populations;

(3) Be able to speak English and foreign language fluently, including regionalisms and colloquial slang without altering meanings, and do so with clear and intelligible pronunciation;

(4) Be able to interpret in a manner that is factually and conceptually accurate without changes, omissions, or additions;

(5) Be able to preserve the tone, sentiment, and emotional level of the original oral statement;

(6) Be able to maintain appropriate speed and projection while rendering interpretation, and request an incorporate clarification of speaker's statements only when justified; and,

(7) Abide by relevant code of linguist ethics.

b. The Department reserves the right to examine at any time the qualifications of new interpreter(s) to assess their suitability and to review the qualifications of any interpreter(s) assigned work under the contract.

4-12. Translation of Vital Documents and Information.

a. The Department prioritizes translation of vital documents by qualified translators to ensure meaningful access to LEP persons. Classification of a document as "vital" depends upon the importance of the program, information, encounter, or service involved, and the consequence to the LEP person if the information is not provided accurately or in a timely manner. Vital documents are not limited to hard copy brochures, forms, or applications. Vital documents may also include text on webpages and automated online systems and digital platforms. Information that may be considered vital may include, but is not limited to:

(1) Applications to participate in a Department program or activity or to receive benefits or services;

(2) Consent forms, complaint forms, intake forms, letters containing important information related to participation (such as cover letters outlining conditions of participation in a public benefit program);

³ See <http://www.govtilr.org/Skills/interpretationSLDsapproved.htm>.

(3) Written notices pertaining to eligibility requirements, rights and responsibilities, losses, denials, waivers, decreases in benefits or services, foreclosures, or terminations of services or benefits and/or the right to appeal such actions;

(4) Notices advising LEP persons of the availability of free language assistance;

(5) Written tests that do not assess English language proficiency, but test competency for a particular license, job, or skill for which knowing English is not required;

(6) Outreach materials; and,

(7) Any documents that require a response from applicants, beneficiaries, and other participants.

b. Any revisions to English versions of a vital documents must also be translated into the target language in a timely manner. Programs are encouraged to consult with each other and with entities representing LEP interests – including community groups, non-profit organizations, and other stakeholders – to determine which outreach materials should be translated and target languages for translation.

c. If a vital document is not translated, the Department shall issue a multilingual tagline notice informing LEP persons that they may receive the same information in a language they understand by calling the Program Office number. Multilingual taglines are short statements written in English and target non-English languages that notify LEP individuals about the importance of a particular document and the availability of qualified, competent language assistance free of charge.

4-13. Contracting for Translations. The Translation Contractor shall supply translators in the languages specified by the Department who possess a minimum of two (2) years of experience in all phases of language translations. Translators must be independently assessed in translation/transcription skills with passing scores (defined as Interagency Language Roundtable (ILR) scores of 2+ or equivalent) on language/translation tests administered by the federal government or an equivalent qualified professional organization.

a. The Department accepts current certifications from the following: the National Association of Judiciary Interpreters and Translators (NAJIT); the American Translators Association (ATA); and the Council for Teaching of Foreign Languages (ACTFL) through its branch Language Testing International (LTI). A qualified translator/transcriber must:

(1) Know both English and target language vocabularies typically used in formal, consultative, and casual modes of communication in a social services context, including colloquial slang, idiosyncratic slang, and regionalisms;

(2) Know specialized vocabulary (and terminology) in both English and the target language related to the Department's varied roles and missions, particularly in Department programs which interact consistently with LEP populations;

(3) Write in English and the target language fluently including regionalisms and colloquial and idiosyncratic slang without altering meaning;

(4) Transcribe or translate in a manner that is factually and conceptually accurate without changes, omissions, or additions; and

(5) Preserve the tone, sentiment, and emotional character of the materials.

b. The permanent nature of written translations imposes additional responsibility on the Department to ensure that the quality and accuracy permit meaningful access by LEP persons. The Department reserves the right to verify translation accuracy and to examine at any time the qualifications of new translator(s) to assess their suitability and to review the qualifications of any translator(s) assigned work under the contract.

4-14. Verifying Translation Accuracy. Translators of written documents should also be competent to translate. The skill of translating is very different from the skill of interpreting; a person who is a competent interpreter may or may not be competent to translate.

a. Certification or accreditation may not always be possible or necessary. For some languages formal accreditation may not exist. In this case a particular level of membership in a professional translation association may provide some indicator of competence.

b. Ensure competence by having a second, independent translator check the work of the primary translator.

c. Translators should understand the expected reading level of the audience and, where appropriate, have fundamental knowledge about the target language group's vocabulary and phraseology. Community organizations may assist in determining whether a written document is of good quality level for the audience.

d. Consistency in the words and phrases used to translate terms helps avoid confusion by LEP persons and may reduce costs. Creating or using already-created glossaries of commonly used terms may be useful for LEP persons and translators and cost effective for the Department.

e. The permanent nature of written translations imposes additional responsibility on the Department to ensure that the quality and accuracy permit meaningful access by LEP persons.

4-15. Telephone Communications with LEP Individuals.

a. If DCF and Provider staff are not able to speak to an LEP individual through an in-person interpreter or in the LEP person's primary language, staff must be equipped with and use a telephone interpretation line.

b. Mental Health Treatment Facility, Program, and Provider LEP Single Points of Contact shall ensure that all staff are trained to use telephone interpretation and have the requisite passwords and access codes to access a telephone interpreter.

4-16. Tracking/Reporting. Tracking and reporting the frequency and type of interactions with LEP individuals and the Department's usage of language assistance services will help the Department improve and refine its ability to effectively provide language assistance services to LEP individuals.

a. Once an individual is identified as LEP and has indicated his/her preferred language, all subsequent interactions with the individual will be in the LEP individual's preferred language.

b. If the LEP individual waives free communication assistance the Department may obtain its own interpreter in order to ensure accuracy and effectiveness of the communication.

c. Staff must make notation in the client or electronic record when providing language assistance services to an LEP individual. The language assistance services provided must be available for monthly reporting purposes to the SPOC.

d. Program Offices may adapt a tracking system to better suit their data management infrastructure if it captures the data required to complete the language assistance services provided to be reported to the Office of Civil Rights monthly.

4-17. Requesting Feedback from Customers and/or Companions.

a. DCF Program, Mental Health Treatment Facility, and DCF Provider staff will provide the Customer/Companion Feedback form (form CF 744, available in DCF Forms) to each customer or companion who is limited English proficient. The purpose of the Customer/Companion Feedback Form is to collect data on the effectiveness and appropriateness of the interpreter service provided and the performance of the interpreter.

b. The customer or companion is not required but may choose to provide feedback when given the opportunity.

c. Customers or companions who have a physical or mental disability and who are limited English proficient may have difficulty understanding or completing the feedback form. The Department or Provider staff will offer assistance, including additional language services (translation, in language or sight translation using an interpreter, reasonable modifications, and auxiliary aids and services) where necessary.

d. Mail the Customer/Companion Feedback forms to the Office of Civil Rights where it will be retained in accordance with DCF records retention policy for monitoring and self-assessment purposes.

4-18. Program, Mental Health Treatment Facility, and Provider-Specific Language Access Guides. Each Headquarters Program Office, and Mental Health Treatment Facility shall create a language access guide that aligns or conforms with this plan no later than 180 days after the effective date of this policy. The Department also encourages Providers to create a language access guide geared towards its LEP population and the unique programs and activities each entity provides.

a. Any entity that has not opted to prepare a program-specific language access guide should adopt the policies and principles discussed in this operating procedure. Language access guides or plans from other departments or Department-affiliated entities may supplement the definitions and policies contained herein if its proposed plan aligns with the objective of providing LEP persons with meaningful access to Department programs and activities. Existing local or regional language access guides must be updated within 90 days of the effective date of this plan to conform with this CFOP. The HRACR will work with Programs to ensure any Program-level language access guides or plans align or conform with this Departmental plan.

b. An electronic copy of the Program and Mental Health Treatment Facility Program-Specific guides will be provided to the Office of Civil Rights for posting to the internet webpage. Access codes to obtain interpreter or translation services shall be redacted from this electronic copy.

c. Providers shall provide a copy of their language access guides or plans to the contracting Program Office to be maintained in the Provider's DCF file.

4-19. Monitoring for Compliance. Civil Rights compliance will be monitored as outlined in Chapter 6, Civil Rights Compliance Assurances and Compliance Reviews, of this operating procedure.

4-20. Complaints of Discrimination. Allegations and complaints of discrimination with the administration of Department's language access policy by Programs, Mental Health Treatment Facilities, and Providers will be addressed as outlined in Chapter 7, Discrimination Complaints Procedures, of this operating procedure.

Chapter 5

WEB ACCESSIBILITY, MEANINGFUL ACCESS, AND TELECOMMUNICATIONS

5-1. General. This chapter applies to the Department and all Providers and establishes minimum requirements for web accessibility and telecommunications. The Department must ensure that Providers also meet these requirements. The Department is required by section 282.603(1), F.S. to comply with Section 508 of the Rehabilitation Act of 1973. The Department's webpages shall comply with Communication Technology Standards and Guidelines.

5-2. Public Websites. All public facing webpages shall contain a link to the following:

- a. Nondiscrimination Statement.
- b. Privacy Statement.
- c. Accessibility Statement.
- d. Multilingual Tagline Notice (if the webpage contains vital information).

5-3. Section 508 Compliance. The Department must:

a. Ensure that all communication devices, including, but not limited to, facsimile machines, telephone, and on-line copiers and scanners comply with Section 508, Accessibility Standards. Additional information can be found at <https://www.myflfamilies.com/accessibility.shtml>.

b. Ensure that the Department's websites and all documents posted to the website comply with Section 508, Accessibility Standards. The Web Content Accessibility Guidelines (and associated checklists) can be found at www.w3c.org/WAI/Resources.

c. Ensure that software applications, multimedia productions and training developed, produced or used by the Department comply with Section 508, Accessibility Standards.

5-4. Web-Based Information. Web-based information/notification shall be provided in alternative formats for individual with a disability or contain a link to the contact where free alternative formats may be requested. The Department prioritizes translation of vital documents and vital information by qualified translators to ensure meaningful access to LEP persons (see paragraph 4-12 of this operating procedure). If a vital document is not translated, a multilingual tagline link offering free language assistance services must be visible on program websites or online platforms notifying LEP individuals about the importance of a document and how to access this vital information in a language they understand.

a. Websites and online automated application and account management systems maintained by the Department and its Providers of customer services shall include notices to customers or companions who are individuals with a disability of the availability of reasonable modifications and accommodation through auxiliary aids and services.

b. DCF websites and online automated application and account management systems maintained by the Department must include a link to a multilingual tagline providing notice to LEP persons of the availability of free language assistance services and auxiliary aids and service or other reasonable modifications.

5-5. Web Accessibility. The Department must ensure that its websites and all documents posted to the website, blogs, social media pages or other public facing electronic content comply with Section 508, Information and Communications Technology (ICT) Standards and Guidelines.

5-6. Undue Burden.

a. In determining whether conformance to requirements in the Revised 508 Standards (effective March 20, 2017 with compliance by January 18, 2018) would impose an undue burden on the agency, the agency shall consider the extent to which conformance would impose significant difficulty or expense considering the agency resources available to the program or component for which the ICT is procured, developed, maintained, or used.

b. Where conformance to one or more requirements is not commercially available the agency shall procure the ICT that best meets the Revised 508 Standards consistent with the agency's business needs.

(1) The responsible agency official shall document in writing the basis for determining that conformance to requirements in the Revised 508 Standards constitute an undue burden on the agency or would result in a fundamental alteration in the nature of the ICT. The documentation shall include an explanation of why and to what extent compliance with applicable requirements would create an undue burden or result in a fundamental alteration in the nature of the ICT.

(2) The agency shall provide an individual with a disability access to and use of information and data by an alternative means that meets identified needs.

5-7. Translation of Vital Information. The Department must ensure LEP individuals have meaningful access to its program websites and online automated services, including but not limited to, vital information within online applications, EBT account management platforms, digital platforms (YouTube, Facebook, Twitter, etc.), forms and brochures. If a webpage or online platform is translated into a non-English language, all vital information, and hyperlinks to vital information within these online automated systems and webpages must be accurately translated into the target language. This includes hyperlinks to vital information, dropdown boxes, attachments, disclaimers, disclosures, warnings, and other notices that may impact how individual proceeds on an online platform. If a webpage or online platform displaying vital information is not translated, multilingual tagline notices offering free language assistance services must be visible on the program website or online platform.

5-8. Telecommunications.

a. Individual with a Disability.

(1) Where the Department communicates by telephone with applicants and beneficiaries, text telephones (TTYs), Relay Service or equally effective telecommunications systems shall be used to communicate with individuals who are deaf or hard of hearing or have speech disabilities.

(2) Where the Department uses an automated attendant system, including, but not limited to, voice mail and messaging, or an interactive voice response system, for receiving and directing incoming telephone calls, that system must provide effective real-time communication with individuals using auxiliary aids and services, including TTYs and all forms of FCC-approved telecommunication relay systems, including internet-based relaying systems.

(3) The Department shall respond to telephone calls from a telecommunications relay service established under Title IV of the Americans with Disabilities Act in the same manner that it responds to other telephone calls.

b. Limited English Proficient.

(1) Staff who receive a call and cannot or do not know how to identify the language spoken by an LEP individual should immediately access the contracted telephone interpretation service to assist in identifying the caller's primary language.

(2) Call Centers shall ensure that FL DCF's automated telephone response system is meaningfully accessible to all LEP individuals. LEP individuals in our state speak many different languages. The Department's automated telephone response systems (and any written, audio or video instruction) should ensure that all LEP individuals have meaningful access to DCF and EBT customer service lines. The Abuse Hotline, ACCESS Customer Call Centers and EBT Call Center must take reasonable steps to provide meaningful access to individuals with LEP. Callers must have at least the options of selecting from the following:

(a) English (this is the default language).

(b) Spanish.

(c) Haitian Creole.

(d) If no response or incorrect response from caller, call must forward to an operator.

(3) Assigned Single Points of Contact shall work with relevant Call Center management to ensure that all DCF and EBT call center operators know how to access telephone interpreters and are trained to communicate effectively with LEP persons through a telephone interpreter.

Chapter 6

CIVIL RIGHTS COMPLIANCE ASSURANCES AND COMPLIANCE REVIEWS

6-1. Assurance Statement. The Department assures Civil Rights compliance in all programs, benefits, services, and activities administered by the Department and provided by its Providers.

a. This includes meaningful access for individuals with limited English proficiency (LEP), ensuring equal opportunity access and equally effective communication for persons with disabilities, and nondiscrimination in domestic violence federally assisted programs.

b. The Department and its Providers will comply with all applicable Civil Rights requirements, including but not limited to the following:

(1) Title VI of the Civil Rights Act of 1964.

(2) Title IX of the Education Amendments Act of 1972.

(3) Title II and Title III of the Americans with Disabilities Act of 1990, as amended by the ADA Amendments Act of 2008.

(4) Sections 504 and 508 of the Rehabilitation Act of 1973.

(5) Section 11(c) of the Food and Nutrition Act of 2008, as amended.

(6) Age Discrimination Act of 1975.

(7) Omnibus Crime Control and Safe Streets Act of 1968.

(8) Violence Against Women Act of 1994 and 2000.

(9) Violence Against Women Reauthorization Act of 2005 and 2013.

(10) Health Insurance Portability and Accountability Act of 1996.

(11) Genetic Information Nondiscrimination Act of 2008.

c. Providers shall notify the Department of any lawsuit or complaint filed against the Provider alleging discrimination or other allegations regarding the administration of Departmental programs, benefits, services, and activities.

6-2. Civil Rights Compliance Checklist. This document is a self-assessment.

a. Each DCF Program Office, Mental Health Treatment Facility, and Provider will complete and submit the Civil Rights Compliance Checklist online through Formsite (<https://fs16.formsite.com/DCFTraining/vrrgopyure/index.html>) or by using form CF 946 (available in DCF Forms), in the following manner:

(1) An Initial Civil Rights Compliance Checklist within 30 days of execution of a contract;
and,

(2) An Annual Civil Rights Compliance Checklist by July 15 of each year.

b. The data reported shall reflect the Department's state fiscal year (July 1 thru June 30). If the reporting period is less than the state fiscal year, the data will be for a partial year. For the last year of a contract form CF 946 must be submitted within 15 days after the end of the contract.

(1) DCF Program Offices. Each DCF Program Office Program Administrator or designee will review the form CF 946 for completeness and maintain the original in the appropriate file. Following their review, a copy will be sent to the Civil Rights Officer no later than July 30 each year.

(2) Mental Health Treatment Facilities. Each Mental Health Treatment Facility Administrator or designee will review the form CF 946 for completeness and maintain the original in the appropriate file. Following their review, a copy will be sent to the Civil Rights Officer no later than July 30 of each year.

(3) Providers. Each Contract Manager or designee will review the form CF 946 received from the Provider for completeness and maintain the original in the appropriate file. Following their review, a copy will be sent to the Civil Rights Officer no later than July 30 of each year.

(4) Civil Rights Officers. Each Civil Rights Officer will review the submitted form CF 946 and notify the appropriate Program Administrator, Mental Health Treatment Facility Administrator, or Contract Manager of compliance or non-compliance.

6-3. Civil Rights Compliance Monitoring. Compliance will be monitored by the DCF Office of Civil Rights and may consist of the following:

a. Civil Rights Compliance Checklist (form CF 946) Reviews. Each DCF Program Office, Mental Health Treatment Facility, and Provider will be assessed for Civil Rights compliance using form CF 946 and will take place annually per paragraph 6-2 above.

b. Limited Scope Reviews. Each DCF Program Office, Mental Health Treatment Facility, and Provider may be assessed for Civil Rights compliance through a Limited Scope Review. Limited Scope Reviews will focus upon a narrow area of compliance. This may include a review of documents requested (i.e., form CF 946), responses to self-surveys, monthly summary reports, on-site visits, past monitoring reports, and corrective action plans (if applicable).

c. Full Scope Reviews. Each DCF Program Office, Mental Health Treatment Facility, and Provider may be subject to a Full Scope Review. All aspects of Civil Rights compliance, including those referenced in form CF 946 Reviews and Limited-Scope Reviews above, will be examined using approved monitoring tools.

d. Management Reviews of Department programs and activities will be conducted at the request of a member of Department Leadership when deemed appropriate by the Human Resources Administrator for Civil Rights.

e. Federal Civil Rights Compliance Reviews will be conducted as required by the federal agency involved. The DCF Office of Civil Rights will coordinate the review.

6-4. Non-Compliance. If non-compliance is found, the Program Office, Mental Health Treatment Facility, or Provider must develop a corrective action plan, within 60 days of the Notice of Non-Compliance, to remedy all deficiencies. The DCF Office of Civil Rights may also initiate a more in-depth compliance review to determine the cause of non-compliance. The Department must abide by FNS Instruction 113-1 when resolving noncompliance in SNAP.

Chapter 7

DISCRIMINATION COMPLAINTS PROCEDURES

7-1. General.

a. This chapter applies to all Department programs, benefits, activities, and services and establishes uniform procedures for resolving customer complaints of discrimination filed against the Department and its Providers. These procedures apply to any individual who alleges unlawful discrimination by reason of any basis identified in Title VI of the Civil Rights Act of 1964, as amended, or any basis identified in any federal or state statutes that may apply. Some of these bases are race, color, sex, sexual orientation, gender identity, marital status, parental status, familial status, political beliefs, religion, age, national origin, or disability.

NOTE: Not all bases apply to all Department programs.

b. No person shall be subjected to retaliation, harassment, intimidation, threats, coercion for making a charge, testifying, assisting, or participating in any manner in an investigation, proceeding or hearing, or for making a complaint or participating in the investigation of an alleged unlawful discriminatory practice prohibited by state or federal law.

7-2. Communication Assistance. Communication assistance, other modifications, accommodations and/or alternative formats will be provided to assist individuals who have limited English proficiency (LEP) and individuals with a disability to participate in the discrimination complaint process.

7-3. Complaint Filing – Service Delivery.

a. Any individual who believes that they have been discriminated against when accessing the Department's programs, benefits, activities, and services, may file a written complaint of discrimination within 180 days of the alleged discriminatory act. Only the Secretary of each federal agency can extend this timeframe with good cause.

b. All complaints meeting the criteria in paragraphs 7-3e and 7-3f must be forwarded to the Office of Civil Rights within 24 hours of receipt for proper handling. Addresses for the Offices of Civil Rights are listed below:

Office of Civil Rights
Florida Department of Children and Families
2415 North Monroe Street
Suite 400
Tallahassee, Florida 32303-4190
850-487-1901; TDD 850-922-9220; Fax 850-921-8470

c. Staff must notify complainants that they may file a discrimination complaint directly with the applicable federal agency:

U.S. Department of Agriculture
Office of the Assistance Secretary for Civil Rights
1400 Independence Avenue, SW, Stop 9410
Washington, DC 20250-9410
(202) 260-1026 (local)
(866) 632-9992 (toll-free)
(800) 877-8339 (local or federal relay)
(800) 845-6136 (Spanish relay)
(202) 690-7442 (fax)

program.intake@usda.gov

<https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf> (English)

<https://www.usda.gov/sites/default/files/documents/USDAProgramComplaintForm-Spanish-Section508Compliant.pdf> (Spanish)

U.S. Department of Health and Human Services (HHS)

Office for Civil Rights

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, DC 20201

(800) 368-1019 (toll-free)

(800) 537-7697 (TDD toll-free)

ocrmail@hhs.gov

https://ocrportal.hhs.gov/ocr/cp/wizard_cp.jsf

U.S. Department of Justice (DOJ)

Civil Rights Division

Office of the Assistant Attorney General

950 Pennsylvania Avenue, N.W.

Washington, D.C. 20530

(202) 514-4609 (voice)

(202) 514-0716 (TDD)

(202) 307-1197 (Fax)

<https://www.justice.gov/crt/how-file-complaint>

d. The Office of Civil Rights is the Department's central intake point for all complaints (form CF 10A, available in DCF Forms) of discrimination filed with the Department or filed with its Providers that involve the administration or operation of programs, activities, benefits, or services. Providers receiving a complaint of discrimination must immediately forward the complaint to the Department's Office of Civil Rights. The Department and its Providers receiving discrimination complaints must keep discrimination complaints separate from any other complaints and only accessible to authorized personnel.

(1) The Office of Civil Rights will investigate, and process Civil Rights complaints filed in SNAP within 90 days of receipt in accordance with FNS Instruction 113-1 (including the requirement to mediate with the Federal Mediation and Conciliation Service (FMCS)). This includes notifying the FNS Regional Civil Rights Officer (RCRO) when a complaint is received and forwarding draft determination letters and investigative reports to the RCRO for review and concurrence.

(2) The Office of Civil Rights must forward complaints based on age (or a combination of age and other bases to the appropriate federal agency's civil rights office within five (5) business days of receipt.

e. The complaint must contain:

(1) Name, street address and current working phone number (or other contact information that can be used for contact purposes) for the person filing the complaint.

(2) Name, street address and current working phone number or other means of contacting the person on whose behalf the complaint is being filed, if different from the person filing the complaint.

(3) Name and address of the person or provider (respondent) against whom the complaint is filed.

(4) Basis for the complaint: race, color, religion, sex, marital or familial status, age, national origin, disability, political beliefs, or retaliation. Not all bases apply to all programs.

(5) As many dates as can be remembered for when the alleged discrimination occurred.

(6) Description of the incident or action that is the reason for filing the complaint.

(7) The first and last names and street address for each witness.

(8) Must be signed by the complainant(s) or someone authorized to sign on behalf of the complainant(s) and dated. The complaint does not need to be written or signed if it is submitted in an alternate format to accommodate the complaint filing needs of a person who has a Limited English Proficiency (LEP), a disability, or other special need.

f. Verbal Complaints. In the event a Charging Party makes the allegations of discrimination verbally or in person and refuses, or is not inclined to place, such allegations in writing, the person to whom the allegations are made must contact the Office of Civil Rights. Any verbal discrimination complaints regarding federal financial assistance will be accepted and forwarded to the federal agency if it contains the following:

(1) The location and name of the organization or office which is accused of discriminatory practices.

(2) The nature of the incident or action or the aspect of program administration that led the person to allege discrimination.

(3) The basis for the alleged discrimination.

7-4. Complaint Filing-Employment. Complaints of employment discrimination by Department employees will be handled in accordance with CFOP 60-15, Equal Employment Opportunity, Chapter 4.

7-5. Notification of Complaint.

a. Internal Complaints. Upon receipt of a written complaint filed directly with the Department, the DCF Office of Civil Rights will send a written acknowledgement of the receipt of the complaint to the Charging Party within (5) five business days after receipt. A notification of the filing of the complaint along with the charging document shall be sent to the appropriate Deputy Secretary, Assistant Secretary, or Mental Health Treatment Facility Administrator. Within five (5) working days after receipt of all complaints the DCF Office of Civil Rights will forward the complaint to the appropriate federal agency if required by federal regulations or directives.

b. External Complaints. Upon receipt of notification of a complaint filed directly with an external agency, the DCF Office of Civil Rights shall notify the appropriate Deputy Secretary, Assistant Secretary, or Mental Health Treatment Facility Administrator of such complaint and provide a copy of the charging document. The complaint will be assigned to a DCF Civil Rights Officer for investigation of the allegations.

7-6. Complaint Decision and Disposition.

a. Internal Complaints.

(1) Upon disposition of the complaint the Charging Party and appropriate parties will be notified of the closure in writing. If the Charging Party does not agree with the Complaint determination/disposition, they may file an appeal externally with one of the agencies listed in this

operating procedure. For SNAP complaints, the following language should be included in all decisions issued by FNS and the Department unless a modification is necessary to provide notice in an accessible format or language that the Complainant or their authorized representative can understand:

If you disagree with this decision, you may appeal to the Office of the Assistant Secretary for Civil Rights at the U.S. Department of Agriculture. You must do so within 90 days of receiving this letter. To appeal this decision, write to:

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights, Stop 9430
1400 Independence Avenue, S.W.
Room 212-A Whitten Building
Washington, D.C., 20250

(2) Prior to issuance of a letter of findings, the Human Resources Administrator for the Office of Civil Rights will review these findings with the Office of General Counsel and provide a draft letter of findings with a copy of the report of investigation for review and concurrence to Federal Civil Rights Offices if required by Federal laws, regulations or directives governing the program in question.

(3) The Department must promptly notify federal agencies as required, of any lawsuit filed against the Department, or its providers, alleging discrimination based on race, color, national origin, sex, disability, religion or political beliefs, and retaliation or reprisal for engaging in a federally protected Civil Rights activity.

b. External Complaints.

(1) The DCF Office of Civil Rights will prepare a position statement supporting the finding and will submit the statement along with supporting documentation to the external agency that will make the final determination/disposition of the complaint.

(2) If the external agency issues a letter of violation, the external agency may initiate conciliation coordinated internally with the DCF Office of Civil Rights, the Human Resources Director, and the General Counsel.

Chapter 8

REPORTS AND RECORDKEEPING

8-1. General. The reports and reviews required for implementing Civil Rights compliance activities will be maintained and reviewed to determine the extent to which provisions of this operating procedure and the related Civil Rights compliance requirements have been followed.

8-2. Reports.

a. Form CF 946 (Civil Rights Compliance Checklist) must be completed by each Provider, Mental Health Treatment Facility, or program office within 30 days of signing a contractual agreement and annually thereafter. A copy is submitted annually to the appropriate Civil Rights Officer by July 30th.

b. The Civil Rights Officer will annually complete a form CF 1541 for each program and submit it to the Human Resources Administrator for the Office of Civil Rights by September 30th.

c. Review of and any necessary updates to this procedure will be completed by the Office of Civil Rights by April 15th of each year.

d. Copies of Equal Employment Opportunity Plans, EEOP Short Forms, or Certification Forms required by the Department of Justice must be submitted by subrecipients for review to DCF Office of Civil Rights annually by October 1st.

e. Department and its Providers will track and record the provision of Reasonable Modifications and Auxiliary Aids and Services to customer/companions with a disability when an individual with a disability accesses the Department or its Providers' programs, benefits, activities, or services. This record and supporting documents shall be available for review by the Civil Rights Officer upon request.

f. Department and its Providers will track and record the provision of interpreters to customers/companions with LEP when an LEP individual accesses the Department or its Providers' programs, benefits, activities, or services. This record and supporting documents will be available for review by the Civil Rights Officer upon request.

8-3. Recordkeeping.

a. All records, reviews, checklists, compliance agreements, corrective action plans, reviewer notes, review summaries and other documentation reflecting Civil Rights compliance activities will be maintained by the Civil Rights Officers in accordance with DCF records retention policy.

b. The original form CF 946 will be maintained with the contract or in the Provider file.

c. Documentation of the dissemination of the Department nondiscrimination policy and procedures, including to whom sent or given, how and when it was distributed, and what information was provided will be maintained by the DCF Office of Civil Rights, Program Offices, and Providers.

8-4. Collecting and Reporting Participation Data. The Department is required to obtain data by race and ethnicity on potentially eligible populations, applicants, and participants for all programs. This applies to the Department and its Providers.

a. Notify the public that collection of race and ethnicity data is voluntary, that their response will not affect eligibility or benefit levels, and that their response is kept confidential and may be protected by the Privacy Act. Self-identification or self-reporting is the preferred method of obtaining characteristic data. Program applicants and participants should be encouraged to provide the information by

explaining the use of the statistical data. Do not second guess or in any way change or challenge a self-identification made by the applicant as to his or her race or ethnic category. The following statement may be utilized when requesting racial and ethnic data:

This information is requested solely to determine the Department's or Providers compliance with Federal Civil Rights laws, and your response will not affect consideration of your application. By providing this information, you will assist us in assuring this program is administered in a nondiscriminatory manner.

b. If the applicant declines to self-identify, inform the applicant that a visual identification of his or her race and ethnicity is required, and will be made and recorded in the data system. This visual identification may be determined based on photo identification provided by an applicant.

c. Where demographic data is collected via an online system, provisions must be made for the program applicant/participant to identify his or her race and ethnicity and to verify the data by signing some type of summary printout of the information or by attesting to the correctness and accuracy of the data in some manner.

d. Data collected about potentially eligible persons, program applicants and participants must be:

(1) Collected and retained by the service delivery point for each program as specified in the program regulations, instructions, policies and guidelines;

(2) Maintained at least 3 years;

(3) Maintained under safeguards that restrict access of records only to authorized personnel; and

(4) Submitted, as requested, by the federal agency providing Federal financial assistance.

8-5. Ethnicity and Race Categories. This is a two-question format. First is a designation of ethnicity of Hispanic or Latino or Not Hispanic or Latino. Second is a question of race. The applicant may choose only one ethnicity but may choose multiple categories for race. This may vary by program areas. The Department may have additional categories for race, but the additional categories must be mapped to the correct program categories. The following are the required designations for SNAP.

a. Ethnicity.

(1) Hispanic or Latino. A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

(2) Not Hispanic or Latino.

b. Race.

(1) American Indian or Alaska Native. A person having origins in any of the original peoples of North, Central, and South America and who maintains tribal affiliation or community attachment.

(2) Asian. A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

(3) Black or African American. A person having origins in any of the black racial groups of Africa.

(4) Native Hawaiian, or Other Pacific Islander. A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

(5) White. A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Chapter 9

TRAINING

9-1. General. Training is an important component of a successful Civil Rights/Equal Opportunity Program. Training Department staff and employees of our Providers will enable employees to understand, prevent, and where necessary, correct actions that result in discrimination in the workplace and discrimination in service delivery.

9-2. Training for Staff Who Conduct Compliance Reviews. Staff responsible for reviewing Civil Rights Compliance must receive training to assist them in performing their review responsibilities. This training will be conducted biennially by the Office of Civil Rights or a federal partner and shall include, but is not limited to:

- a. Assurances of Nondiscrimination.
- b. Collection and usage of data.
- c. Effective public notification systems.
- d. Complaint procedures.
- e. Compliance review steps.
- f. Resolution of non-compliance.
- g. Requirements to provide reasonable modifications and auxiliary aids and services for individual with a disability.
- h. Requirements to provide meaningful access to limited English proficient persons.
- h. Verification of Citizenship, Immigration Status and Social Security Numbers.
- i. Conflict resolution
- j. Customer service.

9-3. Training Requirements for All Staff. All Department employees and all Provider employees will receive annual Civil Rights Training. Training for Departmental and Provider staff that provide SNAP services must cover paragraphs 9-2a thru i above. New employees must receive Civil Rights training within the first 30 days of employment. The Education and Training Center of the Office of Quality and Planning is responsible for the provision of EEO/AA training/orientation, as appropriate, to include:

- a. New employee orientation consisting of:
 - (1) Civil Rights laws related to Employment
 - (2) Civil Rights laws related to Customer Services including, but not limited to Title VI of the Civil Rights Act of 1964.
 - (3) May also include, but is not limited to:
 - (a) Identifying the languages needs of an LEP individual;

- services;
- (b) Notifying LEP persons about the availability of free language assistance
 - (c) Obtaining an in-person or telephone interpreter;
 - (d) Working with an interpreter in person or on the telephone;
 - (e) Limitations on the use of families, friends, and children as interpreters
 - (f) Requesting documents for translation from a qualified and competent translator;
 - (g) Accessing and providing language assistance services through qualified and competent multilingual employees, in-house interpreters/translators, or contracted personnel;
 - (h) Duties or professional responsibilities with respect to LEP individuals;
 - (i) Interpreter ethics;
 - (j) Tracking the use of language assistance services; and,
 - (k) Tips on providing effective assistance to LEP individuals.

(4) Title II of the Americans with Disabilities Act of 1990 (ADA) as amended by the ADA Amendments Act of 2008, and Section 504 of the Rehabilitation Act. This training must contain an overview of the ADAAA requirements, including how to make reasonable modifications in policies, practices, and procedures to ensure equally effective communication for customers or companions who are individuals with a disability.

(5) The Health Insurance Portability and Accountability Act.

b. All other employees as scheduled by the Human Resources Administrator for the Office of Civil Rights.

REFERENCE OF AUTHORITY

Americans with Disabilities Act of 1990 (ADA) (42 U.S.C. § 12101 et seq., Title II at 28 CFR 35) prohibits discrimination on the basis of disability in all services, programs, and activities provided to the public by State and local governments (public entities), except public transportation services. Title III at 28 CFR 36 prohibits discrimination on the basis of disability by public accommodations.

Americans with Disabilities Act Amendment Act of 2008 (ADAAA) (Public Law 110-325, 42 U.S.C. § 12101 et seq. at 28 CFR 35), amended the ADA to make significant changes to the meaning and interpretation of the ADA definition of disability to ensure that the term would be broadly construed and applied without extensive analysis so that all individuals with a disability could receive the law's protections.

Title VI of the Civil Rights Act of 1964 (42 USC § 2000d at 7 CFR 15) prohibits discrimination based on race, color, and national origin in programs and activities receiving Federal financial assistance.

Title IX of the Education Amendments of 1972, as amended (Public Law 92-318, 20 USC § 1681 et seq. at 7 CFR 15a) prohibits discrimination based on sex within any education program or activity receiving Federal financial assistance.

Section 504 of the Rehabilitation Act of 1973, as amended (Public Law 93-112, 29 USC § 701 at 7 CFR 15b) prohibits discrimination based on disability within any program or activity receiving Federal financial assistance.

Age Discrimination Act of 1975 (Public Law 94-135, 42 U.S. Code § 6101 at 45 CFR 91 and 7 CFR 15c) prohibits discrimination based on age in programs or activities receiving Federal financial assistance.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) (Public Law 104-193) and Department of Justice (DOJ) Memorandum dated January 28, 1999, entitled, "Policy Guidance Document -- Enforcement of Title VI of the Civil Rights Act of 1964 and Related Statutes in Block Grant Type Programs" (28 CFR §§ 42.101-42.412 and 28 CFR 50.3).

The Civil Rights Restoration Act of 1987 – (Public Law 100-259) clarifies the intent of Congress as it relates to the scope of Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975, to ensure nondiscrimination in all programs and activities of a recipient, whether those programs and activities are federally funded or not.

The Food and Nutrition Act of 2008, as amended, Supplemental Nutrition Assistance Program (SNAP), formerly the Food Stamp Program (7 USC § 2011 et seq. 7 CFR 271, 272, 273, and 276) – prohibits discrimination against any applicant or participant in any aspect of program administration for reasons of race, color, sex, age, national origin, religious creed, political beliefs or disability and notes that, "(t)he administration of the program by a State agency shall be consistent with the rights of households under the following laws (including implementing regulations): the Age Discrimination Act of 1975 (42 USC § 6101 et seq.); Section 504 of the Rehabilitation Act of 1973 (29 USC § 794); The Americans with Disabilities Act of 1990 (42 USC § 12101 et seq.) and Title VI of the Civil Rights Act of 1964 (42 USC § 2000d et seq.).

The Violence Against Women Reauthorization Act of 2013

7 CFR Part 15 – United State Department of Agriculture (USDA) Nondiscrimination Regulations for Federally Assisted Programs

7 CFR 15.1 – USDA implementing regulation for Title VI of the Civil Rights Act of 1964, as amended

7 CFR Part 15a – Education Programs or Activities Receiving or Benefitting from Federal Financial Assistance; USDA implementing regulation for Title IX of the Education Amendments of 1972, as amended

7 CFR Part 15b – Nondiscrimination on the Basis of Handicap in Programs or Activities Receiving Federal Financial Assistance; USDA implementing regulation for Section 504 of the Rehabilitation Act of 1973, as amended

7 CFR Part 15c – Nondiscrimination on the Basis of Age in Programs or Activities Receiving Federal Financial Assistance from the USDA; USDA implementing regulation for the Age Discrimination Act of 1975

7 CFR Part 16 – USDA Equal Opportunity for Religious Organizations

7 CFR § 272.6 – USDA Nondiscrimination compliance (SNAP)

7 CFR § 275 - Performance Reporting System

24 CFR § 1.4 – Discrimination prohibited

24 CFR § 3.115 – Assurance required

28 CFR § 31.202 – Civil Rights

28 CFR § 31.403 – Civil Rights requirements

28 CFR 35 – DOJ Nondiscrimination on the Basis of Disability in State and Local Government Services

28 CFR 36 – DOJ Nondiscrimination on the Basis of Disability by Public Accommodations and in Commercial Facilities

28 CFR § 35.105 – Self-evaluation

28 CFR § 35.150 – Existing facilities

28 CFR § 35.160 - General

28 CFR §35.161 – Telecommunications

28 CFR Part 38 – DOJ Partnerships with Faith-Based and Other Neighborhood Organizations

28 CFR Part 41 – DOJ Implementation of Executive order 12250, Nondiscrimination on the Basis of Handicap in Federally Assisted Programs

28 CFR Part 42 – DOJ Nondiscrimination; Equal Employment Opportunity; Policies and Procedures

28 CFR § 50.3 – DOJ Guidelines for the Enforcement of Title VI of the Civil Rights Act of 1964

28 CFR, §42 – Purpose

28 CFR §42.106 – Compliance information

28 CFR Part 54 – Nondiscrimination on the Basis of Sex in Education Programs or Activities Receiving Federal Financial Assistance

41 CFR Chapter 60, Part 60-2 – Affirmative Action Programs

45 CFR Part 80 – Nondiscrimination Under Programs Receiving Federal Assistance Through the Department of Health and Human Services Effectuation of Title VI of the Civil Rights Act of 1964

45 CFR Part 84 – Nondiscrimination on the Basis of Handicap in Programs or Activities Receiving Federal Financial Assistance

45 CFR § 84.55 – Procedures relating to health care for handicapped infants.

45 CFR Part 86 – Nondiscrimination on the Basis of Sex in Education Programs or Activities Receiving Federal Financial Assistance

45 CFR Part 91 – Nondiscrimination on the Basis of Age in Programs or Activities Receiving Federal Financial Assistance from HHS

45 CFR Part 92 – Nondiscrimination on the Basis of Race, Color, National Origin, Sex, Age, or Disability in Health Programs or Activities Receiving Federal Financial Assistance and Health Programs or Activities Administered by the Department of Health and Human Services or Entities Established Under Title I of the Patient Protection and Affordable Care Act

45 CFR § 92.201 – Meaningful access for individuals with limited English proficiency

45 CFR § 92.202 – Effective communication for individuals with disabilities

45 CFR § 96.123 a (17) – Assurances

Section 282.603, Florida Statutes (F.S.) – Access to Electronic and Information Technology for Persons with Disabilities; Undue Burden; Limitations

Chapter 397, F.S. – Substance Abuse Services

Section 420.624, F.S. – Local Homeless Assistance Continuum of Care

Section 760.50, F.S. – Discrimination on the basis of AIDS, AIDS-related complex, and HIV prohibited

GLOSSARY OF TERMS

1. Alleged Discriminatory Official. Individual(s) accused of alleged discriminatory conduct.
2. Americans with Disabilities Act of 1990, as amended (ADA). Comprehensive law which prohibits discrimination against people with disabilities in employment (Title I), in public services (Title II), in public accommodations (Title III) and in telecommunications (Title IV). The ADA Amendments Act of 2008 expanded the scope of the ADA to be consistent with the Congressional intent of the original law.
3. Americans with Disabilities Amendments Act of 2008. Signed into law on September 25, 2008, to clarify and reiterate who is covered by the law's civil rights protections. The ADA Amendments Act of 2008 revises the definition of disability to more broadly encompass impairments that substantially limit a major life activity. The amended language also states that mitigating measures, including assistive devices, auxiliary aids, accommodations, medical therapies, and supplies (other than eyeglasses and contact lenses) have no bearing in determining whether a disability qualifies under the law. Changes also clarify coverage of impairments that are episodic or in remission that substantially limit a major life activity when active, such as epilepsy or post-traumatic stress disorder. The amendments took effect January 1, 2009.
4. ADA/Section 504 Coordinators. Any individual charged with implementing the requirements of Title II of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act, ensuring the provision of auxiliary aids and services for individuals with a disability. Within the Department, Civil Rights Officers are designated ADA/Section 504 Coordinators.
5. Applicant for Services. A person seeking services from the Department, its Providers, and their subcontractors, but not yet determined eligible for a program or service.
6. Assistive Listening Devices and Systems (ALDs). Amplification systems designed to improve hearing ability in large areas and in interpersonal communications. These systems deliver the desired signal directly to the ears, hearing aids, or cochlear implants of the listener, thus overcoming the negative effects of noise, distance, and echo. Some examples that are available could include, but are not limited to: hardwire, loop, infrared, and FM systems.
7. Auxiliary Aids and Services. Includes:
 - (a) Qualified interpreters, video remote interpreting (VRI) services; notetakers; real-time computer-aided transcription services; written materials; exchange of written notes; telephone handset amplifiers; assistive listening devices; assistive listening systems; telephones compatible with hearing aids; closed caption decoders; open and closed captioning, including real-time captioning; voice, text and video-based telecommunications products and systems, including text telephones (TTYs), videophones, and captioned telephones, or equally effective telecommunications devices; videotext displays; accessible electronic and information technology; or other equally effective telecommunications devices; videotext displays; accessible electronic and information technology; or other effective methods of making aurally delivered information available to individuals who are deaf or hard of hearing;
 - (b) Qualified readers; taped texts; audio recordings; Brailled materials and displays; screen reader software; magnification software; optical readers; secondary auditory programs (SAP); large print materials; accessible electronic and information technology; or other effective methods of making visually delivered materials available to individuals who are blind or have a low vision;
 - (c) Acquisition or modification of equipment or devices; and
 - (d) Other similar services and actions.

8. Blind. Lacking visual perception.

9. Captioning (Closed). Refers to converting the spoken word to text displayed in the visual media (videos, television, etc.) in a way that it is available only to individuals whose televisions are equipped with captioning decoders.

10. Captioning (Open). Refers to converting the spoken word to text displayed in the visual media (videos, television, etc.) so that it is seen by everyone who watches the film (i.e., it cannot be turned off).

11. Certified CART Provider (CCP). This level reporter possesses the knowledge, skill, and ability to produce complete, accurate, simultaneous translation and display of live proceedings utilizing computer-aided translation in a live event setting at speeds exceeding 180 wpm.

12. Certified Deaf Interpreter (CDI). Individuals who are deaf and certified by the Registry of Interpreters for the Deaf (RID) to interpret as part of a team to facilitate communication.

13. Certified Interpreter. A person who is certified by the National Registry of Interpreters for the Deaf (RID) or other national or state interpreter assessment and certification program.

14. Certified Real Time Reporter (CRR). This designation demonstrates a proficiency in real time translation at a greater level than Registered Professional Reporter (RPR).

15. Charging Party. A person who files a complaint of discrimination as provided in this operating procedure.

16. Civil Rights Officer. Employee responsible for investigations, compliance monitoring and review, technical assistance, and coordination of Civil Rights activities.

17. Customer. As used in this operating procedure, this term includes anyone applying for or participating in the services provided by the Department, its Providers, and their subcontractors. It includes persons making general inquiries or in any way seeking access to or receiving information from the Department, its Providers, and their subcontractors, either in person, in writing or via telecommunications. May also be referred to as "Customer" or "Customers."

18. Communication Access Real Time Translation (CART). The simultaneous conversion of spoken words to text through computer-assisted transcription or court reporting and displaying that text on a video screen. Several display options are available. This communication service is beneficial to individuals who are deaf or hard of hearing who do not use sign language or for whom assistive listening devices and systems are ineffective. A verbatim or word-for-word transcription is created. CART can be provided on-site or remotely. Several professional certifications are offered through the National Court Reporters Association.

19. Companion or Companions. A family member, friend, or associate of an individual seeking access to a service, program, or activity of a public entity, who, along with such individual, is an appropriate person with whom the public entity should communicate. Any individual who is one of the following:

(a) a person whom the Customer indicates should communicate with the Department or its Providers about the Customer, such as a person who participates in any treatment decision; a person who plays a role in communicating the Customer's needs, condition, history, or symptoms to the Department;

(b) a person who helps the Customer act on the information, advice, or instructions provided by the Department;

(c) a person legally authorized to make healthcare or legal decisions on behalf of the Customer; or such other person with whom the Department would ordinarily and regularly communicate about the Customer.

20. Compliance Review. A method used to ensure compliance with all Civil Rights regulations as they apply to the Department and its Providers. The compliance review is an onsite or desk review and may be large and complex addressing multiple issues (full scope review) or may address fewer issues (limited scope review).

21. Current Illegal Use of Drugs. Illegal use of drugs that occurred recently enough to justify a reasonable belief that a person's drug use is current, or that continuing use is a real and ongoing problem.

2. Deaf. An individual whose sense of hearing is nonfunctional, with or without technology, for communication and whose primary means of communication is visual. For those customers who use a form of visual communication or signed language, there is also an important cultural aspect. There is a distinction between "Deaf" with a capital "D" and "deaf" with a lowercase letter "d," with "Deaf" referring to those individuals (usually deaf from birth) who use American Sign Language and who consider themselves identified with Deaf culture; and "deaf" referring to individuals who cannot hear, but who may or may not use American Sign Language.

23. Deaf-blind. An individual who has significant combined vision and hearing loss that can affect the way they gain information, communicate, orient, and move within the environment and live daily.

24. DCF Direct Service Facility. Any service center, facility, or office that employs DCF Personnel to provide program services directly to DCF Customers daily. A DCF Direct Service Facility operates within DCF's twenty (20) circuits.

25. DCF or Department. Florida Department of Children and Families.

26. Departmental Programs and Activities. The operating units of the Department that include, but are not limited to, regions, Mental Health Treatment Facilities, service networks receiving Department funds, program offices, 24-hour residential facilities, as well as other service and treatment facilities.

27. Desk Review. An in-house examination of Civil Rights information submitted by a DCF entity or provider.

28. Direct In-Language Communication. Monolingual communication in a language other than English between a multilingual staff and an LEP person (e.g., speaking in Vietnamese to an LEP person who speaks Vietnamese).

29. Direct Threat. A significant risk to the health or safety of others that cannot be eliminated by a modification of policies, practices, or procedures, or by provision of auxiliary aids or services.

30. Discrimination. Different treatment which makes a distinction of one person or a group of persons from others; either intentionally, by neglect, or by the actions or lack of actions based on a protected class, such as race, color, national origin, disability, sex, age, religion and political beliefs.

31. Disparate Impact/Effects. Occurs when a recipient uses a neutral procedure or practice that has a disproportionate, adverse impact on a protected class and lacks a substantial legitimate justification for such procedure or practice. In a disparate impact case, the focus of the investigation concerns the consequences of the recipient's practices, rather than the recipient's intent.

32. Disparate Treatment/Intentional Discrimination. Occurs when similarly situated persons are treated differently because of a protected class. To prove intentional discrimination, one must show that a challenged action was motivated by intent to discriminate.

33. Effective Communication (ADA and LEP). Whatever is written or spoken must be equally as clear and understandable to individuals with disabilities as it is for individuals without disabilities. Communication sufficient to provide the LEP individual with substantially the same level of access to services received by individuals who are not LEP. For example, staff must take reasonable steps to ensure communication with an LEP individual is as effective as communication with others when providing similar programs and services.

34. Essential Functions. The fundamental duties of a job. To determine essential functions, consideration must be given to whether employees in the position are required to perform the function, and then consider if whether removing that function would fundamentally change the job.

35. Facility. All or any portion of buildings, structures, sites, complexes, equipment, rolling stock or other conveyances, roads, walks, passageways, parking lots, or other real or personal property, including the site where the building, property, structure, or equipment is located.

36. Florida Relay Service. The communications link for people who are deaf, hard of hearing, or have a speech disability. Through the Florida Relay Service, people who use specialized telephone equipment can communicate with people who use standard telephone equipment. To call Florida Relay, dial 711.

37. Hard of Hearing. An individual who has a hearing loss that results in the possible dependence on visual methods to communicate in addition to the use of residual hearing, with or without the assistance of technology, such as hearing aids or cochlear implants.

38. Interpretation. The act of listening to a communication in one language source (source language) and orally converting it to another language (target language) while retaining the same meaning.

39. Interpreter (for Disability). A person who engages in the practice of interpreting using sign language, oral Interpreters, cued speech interpreters, or Computer Assisted Real-Time Transcription (CART).

40. Interpreters (for LEP). Someone who translates orally for parties communicating in different languages, such as English to Haitian Creole.

41. Illegal Use of Drugs. The use of one or more drugs, the possession or distribution of which is unlawful under the Controlled Substances Act (21 U.S.C. 812). The term illegal use of drugs does not include the use of a drug when taken under supervision by a licensed health care professional, or other uses authorized by the Controlled Substances Act or other provisions of Federal law.

42. Language Assistance Services. Oral and written language services needed to assist LEP individuals to communicate effectively with staff, and to provide LEP individuals with meaningful access to and an equal opportunity to participate fully in, the services, activities, or other programs administered by the Department and its Providers.

43. Limited English Proficient (LEP) Individuals. Individuals who do not speak English as their primary language and who have a limited ability to read, write, speak, or understand English. LEP individuals may be competent in English for certain purposes (e.g., speaking), but still be LEP for certain types of communication (e.g., reading, writing, or discussing medical, legal, or other complicated or highly specialized topics).

44. LEP Single Point of Contact. Program Administrator (PA) or other individual designated to coordinate the provision of communication assistance to LEP individuals.

45. Limited Scope Review. Limited review of Civil Rights requirements during a review by staff outside the Office of Civil Rights during onsite monitoring visits.

46. Major Life Activities. Caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, sitting, reaching, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, writing, communicating, interacting with others, and working; and the operation of a major bodily function, such as the functions of the immune system, special sense organs and skin, normal cell growth, and digestive, genitourinary, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, hemic, lymphatic, musculoskeletal, and reproductive systems. The operation of a major bodily function includes the operation of an individual organ within a body system.

47. Management Review. A review of policies and procedures conducted in response to a request by administrative officials.

48. Manual Disability. A term used to describe a condition, which limits or prevents the use of a person's upper extremities (arms, hands).

49. Meaningful Access. Language assistance that results in accurate, timely, and effective communication at no cost to the LEP individual. For LEP individuals, meaningful access denotes access that is not unduly restricted, delayed or inferior compared to programs or activities provided to English proficient individuals.

50. Mental Disability. The Americans with Disabilities Act defines this term to include a mental or psychological disorder, such as intellectual disability, organic brain syndrome, emotional or mental illness and learning disabilities.

51. Miniature Horse. A small horse. When individuals with a disability have a miniature horse that has been trained to do work or perform tasks for the individual, the individual must be allowed to participate in the Department's programs and activities when accompanied by their horse as a reasonable modification.

52. Mitigating Measures. Determination of whether an impairment substantially limits a major life activity must be made without regard to the ameliorative (improve) effects of mitigating measures (except for ordinary eyeglasses and contact lenses). The following examples are not considered mitigating measures - any medication, medical supplies, equipment, prosthetics, hearing aids and cochlear implants, use of assistive technology, and learned behavioral or adaptive neurological modifications.

53. Mobility Disability. This term is used to describe a condition that substantially limits a person's upper or lower body mobility. It includes those persons who have limited use of arms, shoulders; persons who use a wheelchair or crutches; people of short stature; those who cannot perform certain hand movements or have difficulty controlling movement; and people with breathing difficulties or stamina limitations. It also includes persons who are blind or who have low vision.

54. Multilingual Employee. An employee who has demonstrated proficiency in English and reading, writing, speaking, or understanding at least one other language through a language assessment or who has been otherwise authorized to use his or her language skills determined by an independent language assessment.

55. Multilingual Tagline Notice. Multilingual taglines are short statements written in English and target non-English languages that notify LEP individuals about the importance of a particular document and the availability of qualified, competent language assistance free of charge.
56. Noncompliance. The finding that any Civil Rights requirement, as interpreted by this procedure, or federal regulations has not been satisfied.
57. Onsite Review. Multi-issue or multi-jurisdiction review of the policies, practices, and procedures of a service provider.
58. Other Power-Driven Mobility Device (OPDMD). Any mobility device powered by batteries, fuel, or other engines—whether or not designed primarily for use by individuals with mobility disabilities—that is used by individuals with mobility disabilities for the purpose of locomotion, including golf cars, electronic personal assistance mobility devices (EPAMDs), such as the Segway®PT, or any mobility device designed to operate in areas without defined pedestrian routes, but that is not a wheelchair.
59. Physical Disability. Any physiological disorder, condition, cosmetic disfigurement, or anatomical loss affecting the neurological, musculoskeletal, respiratory, cardiovascular, reproductive, digestive, genitourinary, hemic, and lymphatic, sensory, skin, or endocrine systems. It includes orthopedic, visual, speech, and hearing disability, cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, HIV disease (symptomatic or asymptomatic), tuberculosis, drug addiction and alcoholism.
60. Primary Language. An individual's primary language is the language in which an individual most effectively communicates.
61. Potentially Eligible Persons. Individuals or households that may be eligible to receive program assistance, benefits or services but have not applied.
62. Program or Activity. All the operations of the Department of Children and Families (DCF)
63. Program Accessibility. An American with Disabilities Act standard, which means a public entity's programs, services, or activities, when viewed in their entirety, must be readily accessible to and usable by individual with a disability. The concept of program accessibility is intended to make the contents of the program, service, or activity equally available and accessible to persons with disabilities without excessive renovations of facilities.
64. Protected Class. A characteristic/factor, such as race, color, national origin, sex, age, or disability, that is protected from unlawful discrimination by federal or state statute, Executive Order and federal or state regulation/policy.
65. Provider. Provider includes all entities, organizations, or individuals administering Department programs, benefits, or services, or that receives federal financial assistance through the Department, whether as a recipient or subrecipient. For disability access requirements, a Provider also includes public entities and public accommodations that provide services or activities on behalf of DCF through contractual or other agreement.
66. Public accommodation. Is a [private entity](#) that owns, leases (or leases to), or operates a [place of public accommodation](#).
67. Public Entity. 1) Any [State](#) or local government; (2) Any department, agency, special purpose district, or other instrumentality of a [State](#) or [States](#) or local government; and (3) The National Railroad Passenger Corporation, and any commuter authority (as defined in section 103(8) of the [Rail Passenger Service Act](#)).

68. Qualified Individual with a Disability (with Respect to Customer Services). An individual with a disability who, with or without reasonable modifications to policies, practices, the removal of architectural, communication, or transportation barriers, or the provision of auxiliary aids and services, meets the essential eligibility requirements for the receipt of services or the participation in programs or activities provided by a public entity.

69. Qualified Interpreter (for individuals with disabilities). An interpreter who, via a video remote interpreting (VRI) service or an on-site appearance is able to interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. Qualified interpreters include sign language interpreters, oral transliterators, and cued-language transliterators.

70. Qualified Interpreter (for limited English Proficient persons). An employee or contracted interpreter who: (1) adheres to generally accepted interpreter ethics principles, including customer confidentiality, impartiality; and (2) has demonstrated competence to interpret through an independent language assessment.

71. Qualified Reader. A person who can read effectively, accurately, and impartially using necessary specialized vocabulary.

72. Qualified Translator (LEP). An employee or contracted translator who: (1) adheres to generally accepted translator ethics principles, including customer confidentiality; and, (2) has demonstrated his or her competence to translate through an independent language assessment and is authorized to do so by contract with the Department.

73. Race/Ethnicity Categories. The U.S. Office of Management and Budget designates ethnicity as "Hispanic or Latino" or "Not Hispanic or Latino." Minimum Categories for race include American Indian or Alaska Native, Asian, Black or African Americans, Native Hawaiian or Other Pacific Islander, and White. Each Program Office must determine the categories for ethnicity and race of all applicants and participants to meet federally required reporting.

74. Reasonable Modification. Provision of a program adjustments and alternatives based on the need of an individual with a disability to enable an individual with a disability equal access to programs or services. Reasonable modifications must be provided unless provision of such results in an undue burden to the provider or a fundamental alteration of the program. A public entity shall make reasonable modifications in policies, practices, or procedure when the modifications are necessary to avoid discrimination on the basis of disability, unless the public entity can demonstrate that making the modifications would fundamentally alter the nature of the service, program, or activity. [28 CFR 35.130(b)(7)(i)]

75. Remote CART. Remote CART is the same as onsite CART except the provider is in a remote location and listens using a telephone or Voice IP (VOIP) connect and transmits verbatim text via the internet.

76. Retaliation/Reprisal. Any unlawful, prohibited action taken against an individual because they filed a complaint of discrimination, opposed a discriminatory practice, or participated in securing a right protected by Civil Rights laws. Any person alleging retaliation may file a complaint with the DCF Office of Civil Rights, United States Department of Agriculture, United States Department of Health and Human Services, United States Department of Justice, or the United States Equal Employment Opportunity Commission as appropriate.

77. Registered Professional Reporter (RPR). This is the basic level of certification required for court reporting as it is the first step in learning the advanced skills necessary to become a CART provider.

78. Sensory Disability. This is a general term, which is used to describe vision, hearing, or speech disability.

79. Sight Translation (LEP). Oral rendering of written text or a document into spoken language by an interpreter without change in meaning based on a visual review of the original text or document.

80. Sign Language Interpreter. A person who engages in the practice of interpreting using sign language.

81. Single-Point-of-Contact (SPOC). Program Administrator (PA) or other individual designated to coordinate the provision of auxiliary aids and services or reasonable modifications to Customers or Companions who are individuals with a disability according to obligations under Section 504 and/or the ADA. Also, an individual designated to coordinate the provision of communication assistance to LEP individuals according to obligations under Title VI of the Civil Rights Act.

82. SNAP Outreach Specialist. Outreach Specialist responsibilities include eligibility pre-screening, application assistance, assistance obtaining and submitting verification documents, SNAP information dissemination at community centers, libraries, nonprofit organizations, community events, community health fairs, and similar locations, SNAP outreach exhibits or booths at community events.

83. Subcontractor. Any individual, organization, or agency providing service to customers (as defined above) on behalf of a primary contracted customer services provider. May also be referred to as a "Sub-recipient."

84. TDD (Telecommunications Device for the Deaf). Devices that are used with a telephone to communicate with persons who are deaf or hard of hearing or who have speech impairments by typing and reading communications.

85. TTY (Teletypewriter). Devices that are used with a telephone to communicate with persons who are deaf or hard of hearing or who have speech impairments by typing and reading communications.

86. Translation. The replacement of written text from one language (source language) into an equivalent written text in another language (target language).

87. Undue Burden (Program Accessibility). Significant difficulty or expense to make alterations to buildings or facilities in which programs, services or activities are conducted to ensure equal benefit and opportunity to persons with disabilities. NOTE: Program access requirements of ADA Title II should enable individual with a disability to participate in and benefit from the programs, services, and activities of public entities in all but the most unusual cases. Determination of undue burden can be made only by the agency head or his/her designee, after considering all resources available for use in the funding and operation of the program.

88. United States Department of Health and Human Services (HHS) – Office for Civil Rights. The federal agency responsible for Departmental compliance with federal regulations including, but not limited to, Title VI of the Civil Rights Act of 1964, as amended, Title IX, Section 504, the Age Discrimination Act of 1978, and the Omnibus Budget Reconciliation Act of 1981, as amended.

89. United States Department of Justice, Office of Justice Programs, Office for Civil Rights. The federal agency responsible for Departmental compliance with federal regulations including, but not limited to, the Omnibus Crime Control and Safe Streets Act of 1968; Victims of Crime Act, Juvenile Justice and Delinquency Prevention Act of 2002, Rehabilitation Act of 1973, Americans with Disability Act of 1990, Education Amendments of 1972, Age Discrimination Act of 1975, United States Department of Justice Regulations 28 CFR Part 42, Executive Order 13279 (Equal Protection of the laws for faith-based and community organizations and Equal Treatment for Faith-based Organizations, 28 C.F.R. pt 38).

90. United States Department of Agriculture (USDA). The federal agency responsible for, but not limited to, improving nutrition and health by providing food assistance and nutrition education through the food assistance program (FNS).

91. Video Relay Services (VRS). Enables a person to use a videophone to communicate with a person who uses a regular phone. The person who is deaf, using a computer with webcam or a videophone, connects to a live interpreter through the Internet. The interpreter voices everything signed by the person who is deaf and signs everything the other person speaks. There is no fee to use a videophone or a video relay service.

92. Video Remote Interpreting (VRI). VRI service means an interpreting service that uses video conference technology over dedicated lines or wireless technology offering high-speed, wide-bandwidth video connection that delivers high-quality video images as provided in 28CFR §35.160(d). Providers must ensure that it provides:

(a) Real-time, full-motion video and audio over a dedicated high-speed, wide-bandwidth video connection or wireless connection that delivers high-speed quality video images that do not produce lags, choppy blurry, or grainy images, or irregular pauses in communication;

(b) A sharply delineated image that is large enough to display the interpreter's face, arms, hands, and fingers, and the participating individual's face, arms, hands, and fingers, regardless of his or her body position;

(c) A clear, audible transmission of voices; and,

(d) Adequate training to users of the technology and other involved individuals so that they may quickly and efficiently set up and operate the VRI.

93. Visual Disability. A generic term use to describe any loss of vision.

94. Vital Document. Paper or electronic written material or text that contains information that is critical for accessing the Department's program or activities or is required by law. Vital documents generally contain information that affect access to, retention in, or termination or exclusion from the Department's program services or benefits.

95. Voice over Internet Protocol (VoIP). A technology that allows telephone calls to be made over computer lines. VoIP call can be made on the internet. VoIP call can be made on the Internet using a VoIP service provider and standard computer audio systems.

96. Wheelchair. A manually operated or power-driven device designed primarily for use by an individual with a mobility disability for the main purpose of indoor or both indoor and outdoor locomotion.



Civil Rights Compliance Review – Limited Scope

Limited Scope Reviews will focus upon a narrow area of compliance as outlined in CFOP 60-16, Chapter 6, paragraph 6-3, Civil Rights Compliance Monitoring.

Please provide the **Name and Contact Information for Provider, program and service provided, name and contact information for the lead agency if different from Provider.**

What Scope is being Reviewed? Part 1, 2, 3, 4, 5, 6, 7 or 8? (or a combination?)

PART 1: Facility Observation (Answer these questions when a virtual or onsite visit occurs.)

1. Are there identified accessible entrances?
2. Are there clearly marked parking spaces for individuals with a disability?
3. Are there elevators when services are offered above or below the accessible entrance floor?
4. Are restrooms accessible?
5. (Add additional questions as necessary for review)
6. (Add questions about concerns raised from CF 946 review)

PART 2: Public Notice Requirements (Look for these during a virtual or onsite visit.)

1. Is the HIPAA Notice of Privacy Practice posted? If so, where?
2. Is the appropriate (USDA, HHS, etc.) Non-Discrimination Poster displayed in service area, vital materials for SNAP and on websites in English and Spanish.?
3. Is there a poster indicating that Free Sign Language Interpreter Services and Auxiliary Aids and Services are available? If so, where? Is it visible to public?
4. Is there a Limited English Proficiency Poster displayed? If so, where? Is it visible to public?
5. Is there an "I Speak" poster displayed? If so, where? Is it visible to public?
6. For SNAP locations is the "And Justice for All" poster displayed? If so, where?
7. Notice to individuals with disabilities about the availability of free reasonable modifications and auxiliary aids and services visible at how to request them.
8. Notice to individuals with limited English proficiency about the availability of free language assistance services and how to request them in frequently encountered languages.
9. Are the instructions for obtaining qualified interpreters (including sign language) and other auxiliary aids and services readily available to staff?
10. (List any other notifications required for specific Program)
11. (Add questions about concerns raised from CF 946 review)

PART 3: Individuals with a Disability (Possible questions to include to determine compliance)

1. Are you an individual with a disability requiring assistance with communication or to access programs, activities, benefits, or services? If "yes", were you offered free communication assistance or other auxiliary aid or service?

2. Did you request communication assistance or other auxiliary aid or service due to a disability? If so, what did your request? Was it provided?
3. Does the Provider have policies and procedures in place to provide reasonable modifications and auxiliary aids and services to ensure equal opportunity to participate and equally effective communication in the Provider's programs and activities as required by Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 (ADA), as amended by the ADA Amendments Act of 2008? If so, please submit a copy of these disability compliance policies and procedures. If not, please explain.
4. How does the Provider notify individuals with disabilities about the availability of free auxiliary aids and services and reasonable modifications and how to request them? Please explain.
5. How does the Provider ensure equally effective communication with individuals with disabilities? Please explain.
6. What type of auxiliary aids and services do Provider staff utilize when communicating with individuals with disabilities? Please check all that apply.

☐ <i>qualified sign language interpreters</i>	☐ <i>audio recordings</i>
☐ <i>note takers, screen readers</i>	☐ <i>large print materials</i>
☐ <i>video interpreting services</i>	☐ <i>Brailled materials</i>
☐ <i>assistive listening systems</i>	☐ <i>closed-captioned decoders</i>
☐ <i>taped texts</i>	☐ <i>written notes</i>
	<i>Other (please specify):</i>

7. Does the Provider contract with qualified interpreter services and other providers so that interpreters and other aids and services will be available on short notice?
8. If YES, please submit a copy of any contract or agreement with the vendor that provides these services. If NO, please explain.
9. What are the Provider's policies and practices regarding the use of family and friends as interpreters for individuals with disabilities?
10. How does the Provider ensure its websites are accessible to individuals with disabilities?
11. How do local agencies record, and track communication assistance or other reasonable modifications provided to individuals with disabilities?
12. Do Provider staff have access to a TTY and do they understand how to return communications received on a TTY or Relay Service?
13. How does the Provider train its employees about effective communication and how to obtain and use auxiliary aids and services? Please explain?
14. How does the Provider train its employees to respond to requests for reasonable modifications to the Provider's policies, practices, and procedures? Please explain.
15. Describe the Provider's policies and procedures when the Provider finds it necessary to deny a requested auxiliary aid, service, or reasonable modification.
16. Has the local agency been reviewed for physical accessibility? If YES, please submit the results of this review. If NO, please explain.
17. (Add questions about concerns raised from CF 946 review)

PART 4: Limited English Proficiency (LEP) – Language Access (Possible questions to include to determine compliance)

1. What type of written guidelines has the Provider given its staff on serving LEP persons? Please submit a copy of these guidelines.
2. Has the provider trained its staff on serving LEP persons? When? By whom?

3. How does the Provider determine the presence and needs of LEP or Non-English speaking LEP groups within its service area? Please explain.
4. Has the Provider conducted a self-evaluation to identify the language assistance needs of LEP groups in the Provider's service area and for its constituents? If NO or N/A, please explain.
5. Specify the top six most frequently spoken non-English languages in the service area.
6. Specify the top six most frequently encountered non-English languages by the Provider.
7. What barriers has the Provider identified to serving individuals with LEP? Please explain.
8. How are LEP customers informed about the availability of no-cost language assistance services? Please explain.
9. How does your agency identify LEP individuals? (Select all that apply)

☐ <i>Assume limited English proficiency if communication seems impaired</i> ☐ <i>Respond to individual requests for language assistance services</i> ☐ <i>Self-identification by the non-English speaker or LEP individual</i> ☐ <i>Ask open-ended questions to determine language proficiency on the telephone or in person</i>	☐ <i>Use of "I Speak" language identification cards or posters</i> ☐ <i>Based on written material submitted to the agency (e.g., complaints)</i> ☐ <i>We have not identified non-English speakers or LEP individuals</i> ☐ <i>Other (please specify):</i>
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10. Are Limited LEP applicants and recipients provided meaningful access to the Provider's programs, activities, benefits, services, including free, qualified interpreters and translated materials?
11. If Yes, what types of language assistance services does your agency provide? (Select all that apply)

☐ <i>Bilingual staff</i> ☐ <i>In-house interpreters (oral)</i> ☐ <i>In-house translators (documents)</i> ☐ <i>Contracted interpreters</i> ☐ <i>Contracted translators</i> ☐ <i>Telephone interpretation services</i>	☐ <i>Video interpretation services</i> ☐ <i>Language bank or dedicated pool of interpreters or translators</i> ☐ <i>Volunteer interpreters or translators</i> ☐ <i>Interpreters or translators borrowed from another agency</i> ☐ <i>Other (please specify):</i>
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12. Please submit current contracts with the Provider's interpretation and translation vendors.
13. How does the Provider ensure interpreters and translators are qualified and competent to interpret vital information for LEP individuals? Please explain.
14. If multilingual staff are used to interpret, have they received training on how to interpret and professional codes for interpreting? Please explain.
15. Have the language skills of multilingual staff been tested to determine proficiency levels? If so, when? By whom? What is the proficiency rating?
16. Under which circumstances does the Provider ask or allow LEP individuals to provide their own interpreters or have family members or friends to interpret for LEP customers? Please explain.
17. Is free language assistance still offered prior to using the customer's informal interpreter for communication purposes?
18. What is the Providers policy on using minor children as interpreters? Please explain.
19. How does staff record and track the primary language spoken and language assistance rendered to LEP customers at the point of service? Please explain.

20. Where is the information stored? Please explain.
21. How does the Provider ensure that vital documents and information that it provides to LEP customers is translated or available in languages that they can understand? Please explain.
22. How does the Provider ensure outreach plans include strategies to reach LEP populations and materials are linguistically and culturally appropriate? Please explain.
23. Are the Providers websites, online automated systems and/or digital platforms used to provide the Department's activities and services available in languages other than English? If so, which languages.
24. If so, have qualified human translators translated these websites, online automated systems and/or digital platforms into non-English languages?
25. If not, describe how the Provider ensures meaningful access to vital information on its websites, online automated systems and/or digital platforms.
26. (Add questions about concerns raised from CF 946 review)

PART 5: Non-Discrimination in Employment – If you interview employees please incorporate these questions into your review questions.

1. Does the Provider inform its employees, applicants, and clients of their protection against discrimination in employment practices? If Yes, how (include reference to any materials used)? Add attachments/ Reference Links. If No or NA, please explain.
2. Do recruitment and notification materials advise applicants, employees, and clients of your non-discrimination policy? If NO, please explain.
3. Does the Provider have a grievance/complaint policy or procedure to receive, investigate and resolve employment discrimination complaints? If Yes, how (include reference to any materials used)? If NO, please explain.
4. (Add questions about concerns raised from CF 946 review)

PART 6: Non-Discrimination in Service Delivery – Please explain any concerns that seem to need a more intensive review.

(Add questions about concerns raised from CF 946 review)

PART 7: Identify HIPAA Concerns – Please explain any concerns that seem to need a more intensive review.

(Add questions about concerns raised from CF 946 review)

PART 8: Identify Other/Miscellaneous Concerns – Please explain any concerns that seem to need a more intensive review.

(Add questions about concerns raised from CF 946 review)



AUXILIARY AID SERVICE RECORD MONTHLY SUMMARY REPORT

Region/Circuit/Institution/Provider:		Contract No.:	Reporting Period:
Name of Program and Address:		Subsection:	
Single-Point-of-Contact:	Name of Person Completing Form:	Telephone:	Date:
SECTION I. CUSTOMERS			
1.	Number of Scheduled Appointments		
2.	Number of Non-Scheduled Appointments		
3.	Number of Auxiliary Aids/Services Requested (the total of 3 and 4 equals the sum of 1 and 2)		
4.	Number of signed Waivers (Waivers signed by the Customer) (the total of 3 and 4 equals the sum of 1 and 2)		
5.	Number of completed Initial Assessments (the total of 5, 6 and 7 equals the sum of 1 and 2)		
6.	Number of completed Reassessments (the total of 5, 6 and 7 equals the sum of 1 and 2)		
7.	Number of Subsequent Appointments (the total of 5, 6 and 7 equals the sum of 1 and 2)		
8.	Number of Appointment Cancellations by interpreter within 24 hours		
9.	Number of Auxiliary Aids/Services Provided Timely (within two (2) hours)		
10.	Number of Denied Auxiliary Aids/Services (denials by DCF or Provider)		
11.	Number of times the Customer failed to appear or arrived late to an appointment when an interpreter was secured by DCF or Provider.		
12.	Number of times the auxiliary aid and service requested was different from the auxiliary aid and service provided by the agency.		
13.	Number of times the interpreter service did not meet the expectations of the customer.		
14.	Number of times the interpreter service did not meet the expectations of the staff.		
15.	Number of times communication was not effective.		
SECTION II. COMPANIONS			
16.	Number of Scheduled Appointments		
17.	Number of Non-Scheduled Appointments		
18.	Number of Auxiliary Aids/Services Requested (the total of 20 and 21 equals the sum of 18 and 19)		
19.	Number of signed Waivers (waivers signed by the Companion) (the total of 20 and 21 equals the sum of 18 and 19)		

20.	Number of completed Initial Assessments (the total of 22, 23 and 24 equals the sum of 18 and 19)	
21.	Number of completed Reassessments (the total of 22, 23 and 24 equals the sum of 18 and 19)	
22.	Number of Subsequent Appointments (the total of 22, 23 and 24 equals the sum of 18 and 19)	
23.	Number of Appointment Cancellations by interpreter within 24 Hours	
24.	Number of Auxiliary Aids/Services Provided Timely (within two (2) hours)	
25.	Number of Denied Auxiliary Aids/Services (denials by DCF or Provider)	
26.	Number of times the Companion failed to appear or arrived late to an appointment when an Interpreter was secured by DCF or Provider.	
27.	Number of times the auxiliary aid and service requested was different from the auxiliary aid and service provided by the agency.	
28.	Number of times the interpreter service did not meet the expectations of the companion.	
29.	Number of times the interpreter service did not meet the expectations of the staff.	
30.	Number of times communication was not effective.	
SECTION III. Auxiliary Aids and Services Provided (This section is completed by Providers only)		
31.	Number of Certified Sign Language Interpreters	
32.	Number of times staff used CART Providers	
33.	Number of Video Relay/Remote Interpreter Services	
34.	Number of times staff used Florida Relay Services/TTY	
35.	Number of times staff used Assistive Listening Devices (ALDs)	
36.	Number of timely Auxiliary Aids/Services Provided	
37.	Number of times the Interpreter failed to appear or arrive to a scheduled appointment.	
SECTION IV. Auxiliary Aids and Services Provided (This section is completed by Department of Children and Families staff only)		
38.	Number of Certified Sign Language Interpreters	
39.	Number of Qualified Sign Language Interpreters	
40.	Number of Video Relay/Remote Interpreter Services	
41.	Number of times staff used CART Providers	
42.	Number of times staff used Florida Relay Services/TTY	
43.	Number of times staff used Assistive Listening Devices (ALDs)	

44.	Number of timely Auxiliary Aids/Services Provided	
45.	Number of times the Interpreter failed to appear or arrive to a scheduled appointment.	
SECTION V. COMMUNICATION PLANS (This section is for Institutions and Residential Settings or for Multiple or Long-Term Visits/Contacts Only)		
46.	Number of Developed Communication Plans (The total of 47, 48, 49, and 50)	
47.	Number of Communication Plans Lasting 30 Days or Less	
48.	Number of Communication Plans Lasting 30 to 45 Days	
49.	Number of Communication Plans Lasting 45 to 90 Days	
50.	Number of Communication Plans Lasting 90 Days or More	
51.	Number of times the Interpreter failed to appear or arrive to a scheduled appointment.	
SECTION VI. OUTSIDE AGENCY REFERRALS		
52.	Number of Referrals Made	
SECTION VII. COMMENTS/OBSERVATIONS		
All services were provided in accordance with the Department's (DCF) policies and procedures, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, as amended by the ADA Amendments Act of 2008 other applicable federal and state laws and regulations.		

INSTRUCTIONS FOR COMPLETING THE AUXILIARY AID AND SERVICE RECORD MONTHLY SUMMARY REPORT

The purpose of this document is to provide instructions for capturing the information needed to verify the number of Customers and Companions served each month who may require auxiliary aids and services, because they are individuals with a disability.

HEADER
• Indicate the Region or Headquarters Office: There are six (6) Regions: Northwest, Northeast, Central, Suncoast, Southeast, and Southern. Headquarters • Indicate the Circuit: There are 20 Circuits. Indicate the Circuit number where your program is located. • Indicate the Institution, if applicable: Florida State Mental Health Treatment Facility, Northeast Florida State Mental Health Treatment Facility, Northeast Florida Evaluation and Treatment Center, Florida Civil Commitment Center, South Florida Evaluation and Treatment Center, South Florida State Mental Health Treatment Facility, Treasure Coast Forensic Treatment Center. • Provider: Indicate the name of the agency contracted to provide customer services for the Department. For example, FCDAV, FCSV, Broward Sheriff's Office.

- **Contract Number, if applicable:** If DCF Provider, include contract number for the program you are reporting. If you are a sub-provider, indicate the lead agency's name.
- **Reporting Period:** Is always the 1st through the last of the month.
- **Program:** Indicate if program is under Abuse Hotline, ACCESS, Adult Protective Services, Child Care, Family Safety, Domestic Violence, Homelessness, Mental Health, Refugee Services, Substance Abuse, etc.
- **Subsection:** If the program falls under ACCESS, then the **subsection** may be Food Stamps. If the program falls under Mental Health, then the **subsection** may be Florida Civil Commitment Center. If your agency is a sub-provider, enter your agency name here.
- **Examples of recording the above information:**

Example 1

Region/Circuit/Institution/Provider Headquarters	Reporting Period: June 1 – June 30, 2010
Contract No: XXXX	
Program: Refugee Services	Subsection: Youth Education

Example 2

Region/Circuit/Institution/Provider Southeast Region/Circuit 15	Reporting Period: June 1 – June 30, 2010
Program: Family Safety	Subsection: Adult Protective Services
Contract No: XXXX	

Example 3

Region/Circuit/Institution/Provider Headquarter/Florida Coalition Against Domestic Violence	Reporting Period: June 1 – June 30, 2010
Contract No: LNXXX	
Program: Domestic Violence	Subsection: Refuge House

- **Single-Point-of-Contact:** This is the person designated as the Single-Point-of-Contact and the person authorized to answer questions and discuss the contents of the information being reported.
- **Name of Person Completing Form:** This may also be the person designated as the Single-Point-of-Contact and/or the person authorized to answer questions and discuss the contents of the information being reported.
- **Telephone:** Include the office phone number, with area code.
- **Date:** Date report is completed.

SECTION I. CUSTOMERS

1. **Number of Scheduled Appointments:** This represents the total number of customers who are individuals with a disability who had scheduled appointments during the reporting period.
2. **Number of Non-Scheduled Appointments:** This represents the total number of customers who are individuals with a disability who did not have appointments and were "walk-ins" during the reporting period.
3. **Number of Auxiliary Aids and Services Requested:** This represents the total number services requested by the Customer. **Note:** The total of 3 and 4 equals the sum of 1 and 2.
4. **Number of signed Waivers:** This total represents the number of Customers who did not request auxiliary aids and services, or who refused such services. This information is obtained from the Free Reasonable Modification and Communication Assistance or Waiver of Free Reasonable Modification and Communication Assistance Form. **Note:** The total of 3 and 4 equals the sum of 1 and 2)

5. **Number of completed Initial Assessments:** Indicate the total number of Customer or Companion Reasonable Modification Assessment and Auxiliary Aid/Service Records completed for Customers who were individuals with a disability. **Note:** The total of 5, 6 and 7 equals the sum of 1 and 2.
6. **Number of completed Reassessments:** Indicate the total number of reassessments completed. Reassessments are completed only if there are changes in the Customer's communication or accommodation needs. For example, a Customer may need additional services because their hearing may have worsened, or they may have a new hearing device; or because of health reasons, they may now be experiencing vision loss. **Note:** The total of 5, 6 and 7 equals the sum of 1 and 2.
7. **Number of Subsequent Appointments:** Indicate the number of follow-up appointments or rescheduled visits. **Note:** The total of 5, 6 and 7 equals the sum of 1 and 2.
8. **Number of Appointment Cancellations within 24 hours:** This represents the total number of appointments cancelled by the interpreter.
9. **Number of Auxiliary Aids and Services Provided Timely (Within two (2) hours):**
 - For any nonscheduled appointment, Staff shall make an interpreter or other auxiliary aid available as soon as possible, but in no case later than two (2) hours from the time the Customer or Staff requests an interpreter or auxiliary aid, whichever is earlier.
 - For scheduled events, staff shall make a qualified interpreter or auxiliary aid available at the time of the scheduled appointment. If an interpreter fails to appear for the scheduled appointment, staff shall take whatever additional actions are necessary to make a qualified interpreter available to the Customer who is deaf or hard-of-hearing as soon as possible, but in no case later than two (2) hours after the scheduled appointment.
10. **Number of Denied Auxiliary Aids and Services:** This represents the number of Customers who requested and were denied Auxiliary Aids and Services. Include an explanation in Section VI. **Note:** Denials may only be made by a Assistant Secretary or Mental Health Treatment Facility Administrator or designee or the Provider Administrator/Director or designee after a determination that the reasonable modification or communication method requested would result in an undue burden or a fundamental alteration of the program, service, or activity.
11. Number of times the Customer failed to appear or arrived late to an appointment when an interpreter or other auxiliary aid was secured by DCF or Contracted Service Provider.
12. Number of times the auxiliary aid and service requested was different from the auxiliary aid and service provided by the agency.
13. Number of times the interpreter service or other auxiliary aid did not meet the expectations of the customer.
14. Number of times the interpreter service or other auxiliary aid did not meet the expectations of the staff.
15. Number of times communication was not effective.

SECTION II. COMPANIONS

16. **Number of Scheduled Appointments:** This represents the total number of Companions who are individuals with a disability who had scheduled appointments during the reporting period.
17. **Number of Non-Scheduled Appointments:** This represents the total number of Companions who are individuals with a disability who did not have appointments and were walk-ins during the reporting period.
18. **Number of Auxiliary Aids and Services Requested:** This represents the total number services requested by the Companion. **Note:** The total of 18 and 19 equals the sum of 16 and 17.
19. **Number of signed Waivers:** This total represents the number of Companions who did not request Auxiliary Aids and Services, or who refused such services. **Note:** This information is obtained from the Free Reasonable Modification and Communication Assistance or Waiver of

Free Reasonable Modification or Communication Assistance Form. **Note:** The total of 18 and 19 equals the sum of 16 and 17.

20. **Number of Completed Initial Assessments:** Indicate the total number of Customer or Companion Reasonable Modification Assessment and Auxiliary Aids/Service Records completed for Companions who were individuals with a disability. **Note:** The total of 20, 21 and 22 equals the sum of 16 and 17.
21. **Number of Completed Reassessments:** Indicate the total number of reassessments completed. Reassessments are completed only if there are changes in Companion's communication needs. For example, a Companion may need additional services because their hearing may have worsened, or they may have a new hearing device; or because of health reasons, they may now be experiencing vision loss. **Note:** The total of 20, 21 and 22 equals the sum of 16 and 17.
22. **Number of Subsequent Appointments:** Indicate the number of follow-up appointments or rescheduled visits. **Note:** The total of 20, 21 and 22 equals the sum of 16 and 17.
23. **Number of Appointment Cancellations within 24 hours:** This represents the total number of appointments cancelled by the interpreter.
24. **Number of Auxiliary Aids and Services Provided Timely (Within two (2) hours):**
 - For a nonscheduled appointment, Staff shall make an interpreter or auxiliary aid available as soon as possible, but in no case later than two (2) hours from the time the Companion or Staff requests an interpreter, whichever is earlier.
 - For scheduled events, staff shall make a qualified interpreter or auxiliary aid available at the time of the scheduled appointment. If an interpreter fails to appear for the scheduled appointment, staff shall take whatever additional actions are necessary to make a qualified interpreter available to the Companion who is deaf or hard-of-hearing as soon as possible, but in no case later than two (2) hours after the scheduled appointment.
25. **Number of Denied Auxiliary Aids and Services:** This represents the number of Companions who requested and were denied Auxiliary Aids and Services. **Note:** Denials may only be made by a Assistant Secretary or Mental Health Treatment Facility Administrator or designee or the Provider Administrator/Director or designee after a determination that the modification or communication method requested would result in an undue burden or a fundamental alteration of the program, service or activity.
26. Number of times the Companion failed to appear or arrived late to an appointment when an interpreter was secured by DCF or Provider.
27. Number of times the auxiliary aid and service requested was different from the auxiliary aid and service provided by the agency.
28. Number of times the interpreter service or other auxiliary aid did not meet the expectations of the companion.
29. Number of times the interpreter service or other auxiliary aid did not meet the expectations of the staff.
30. Number of times communication was not effective.

SECTION III. AUXILIARY AIDS AND SERVICES PROVIDED

This section is for use by Contracted Customer Services Providers only.

31. **Number of Certified Sign Language Interpreters:** This represents the total number of Certified Sign Language Interpreters provided during the reporting period. If the same interpreter was used for more than one Customer or Companion, count each service. For example, if the same interpreter was used for five (5) Customers or Companions, then you would enter the total of 5 interpreters.
32. **Number of times staff used CART Providers.**

- 33. **Number of Video Relay/Remote Interpreter Services:** A Video Relay/Remote Service (VRS), also sometimes known as a Video Interpreting Service, is a video telecommunication service that allows individuals who are deaf, hard-of-hearing and has a communication (speech) disability (D-HOH-SI) to communicate over video telephones and similar technologies with hearing people in real-time, via a sign language interpreter.
- 34. **Number of times staff used Florida Relay Services/TTY.**
- 35. **Number of times staff used Assistive Listening Devices (ALDs).**
- 36. **Number of timely Auxiliary Aids and Services Provided:** This is the total for both the customer and companion.
- 37. **Number of times the Interpreter failed to appear or arrive to a scheduled appointment.**

SECTION IV. AUXILIARY AIDS AND SERVICES PROVIDED

This section is for use by Department of Children and Families (DCF) Staff only. If a Provider is co-located within a DCF Facility, and services are provided by a DCF Staff, then the Provider will complete this section.

- 38. **Number of Certified Sign Language Interpreters:** This represents the total number of Certified Sign Language Interpreters provided during the reporting period. If the same interpreter was used for more than one Customer or Companion, count each service. For example, if the same interpreter was used eight (8) times, then you would enter a total of 8 interpreters.
- 39. **Number of Qualified Sign Language Interpreters (Deaf or Hard-of-Hearing):** This represents the total number of Qualified Language Interpreters provided during the reporting period. If the same interpreter was used for more than one Customer or Companion, count each service. For example, if the same interpreter was used eight (8) times, then you would enter a total 8 of interpreters.
- 40. **Number of Video Relay/Remote Interpreter Services:** A Video Relay/Remote Service (VRS), also sometimes known as a Video Interpreting Service, is a video telecommunication service that allows individuals who are deaf, hard-of-hearing and has a communication (speech) disability (D-HOH-SI) to communicate over video telephones and similar technologies with hearing people in real-time, via a sign language interpreter. **Note:** See instructions for Number 34, 35 or 36 above for reporting multiple uses.
- 41. **Number of times staff used CART Providers.**
- 42. **Number of times staff used Florida Relay Services/TTY.**
- 43. **Number of times staff used Assistive Listening Devices (ALDs).**
- 44. **Number of timely Auxiliary Aids and Services Provided:** This is the total for both the customer and companion.
- 45. **Number of times the Interpreter failed to appear or arrive to a scheduled appointment.**

SECTION V. COMMUNICATION PLANS

(Institutions or Residential Settings or for Multiple or Long-Term Visits/Contacts Only)

- 46. **Number of Developed Communication Plans:** **Note:** This is the total of 47, 48, 49, and 50.
- 47. **Number of Communication Plans Lasting 30 Days or Less.**
- 48. **Number of Communication Plans Lasting 30 to 45 Days.**
- 49. **Number of Communication Plans Lasting 45 to 90 Days.**
- 50. **Number of Communication Plans Lasting 90 Days or More.**
- 51. **Number of times the Interpreter failed to appear or arrive to a scheduled appointment.**

SECTION VI. OUTSIDE AGENCY REFERRALS

- 52. **Number of Referrals Made:** This represent the total number of referrals made during the reporting period to agencies which DCF and its Providers refers its Customers or Companions who are individuals with a disability for additional services.

SECTION VII. COMMENTS/OBSERVATIONS

Include the statement: “All services were provided in accordance with the Department’s (DCF) policies and procedures, Title VI of the Civil Rights Act of 1964, as amended, and other applicable federal and state laws.”

Include any additional comments or observations and explanations during the reporting period.

ADDITIONAL DOCUMENTS TO BE SUBMITTED WITH THE MONTHLY SUMMARY REPORT

- 1) The Customer or Companion Reasonable Modification and Communication Assessment and Auxiliary Aids/Service Record Form in the following instances shall be attached to the Monthly Summary Report.
 - The requested auxiliary aid or service was not what was provided.
 - The auxiliary aid or service did not meet the expectation of the customer/companion or staff
 - The communication was not found to be effective
 - The requested auxiliary aid or service was denied.
- 2) The Reasonable Modification and Communication Assistance or Waiver of Free Reasonable Modification and Communication Assistance Form that corresponds with the above accompanying form.

REPORTING GUIDELINES

The reporting period will follow the guidelines listed below:

- Reporting period will cover the 1st through the last of each month.
- Single-Points-of-Contact are to enter the data into <http://fs16.formsite.com/dcfuser/form3/index.html>, by the 10th of each month.
- Providers Single-Points-of-Contact will receive an email documenting submission of their report and shall provide such documentation to the Contract Manager or Community Partner Liaisons by the 15th business day of each month.

Note: If the due date falls on a weekend or holiday, the report will be due the next business day.

A

Amharic
አኒ እማረኛ ነው ምናገረው.

Arabic
أنا أتحدث اللغة العربية

Armenian
Ես խոսում եմ հայերեն

B

Bengali
আমি বাংলা ভাষা (বাংলা) জানি

Bosnian
Ja govorim bosanski

Bulgarian
Аз говоря български

Burmese
ကျွန်ုပ်တို့/ကျွန်း မြန်မာ ဝှံ့ မြိုင်တတ် မိမိမိ

C

Cambodian
ខ្ញុំនិយាយភាសាខ្មែរ

Cantonese
我講廣東話 (Traditional)
我讲广东话 (Simplified)

Catalan
Parlo català

Croatian
Govorim hrvatski

Czech
Mluvím česky

D

Danish
Jeg taler dansk

Dari
من دری حرف می زنم

Dutch
Ik spreek het Nederlands

E

Estonian
Ma räägin eesti keelt

F

Finnish
Puhun suomea

French
Je parle français

G

German
Ich spreche Deutsch

Greek
Μιλώ το ελληνικό

Gujarati
હું ગુજરાતી બોલું છું

H

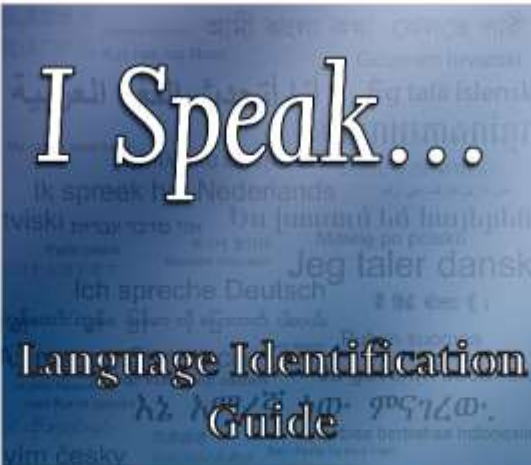
Haitian Creole
M pale kreyòl ayisyen

Hebrew
אני מדבר עברית

Hindi
मैं हिंदी बोलता हूँ।

Hmong
Kuv hais lug Mhoob

Hungarian
Beszéllek magyarul



Q

Qanjobal
Aytin ti ch'ul wai q' anjob' al

Quiche
In k'inch'aw k'uin ch'e quiche

R

Romanian
Vorbesc românește

Russian
Я говорю по-русски

S

Serbian
Ja govorim srpski

Sign Language (American)



Slovak
Hovorím po slovensky

Slovenian
Govorim slovensko

Somali
Waxaan ku hadlaa af-Soomaalii

Spanish
Yo hablo español

Swahili
Ninaongea Kiswahili

Swedish
Jag talar svenska

T

Tagalog
Marunong akong mag-Tagalog

Tamil
நான் தமிழ் பேசுவேன்

Thai
พูดภาษาไทย

Turkish
Türkçe konuşurum

U

Ukrainian
Я розмовляю українською мовою

Urdu
میں اردو بولتا ہوں

V

Vietnamese
Tôi nói tiếng Việt

W

Welsh
Dwi'n siarad

X

Xhosa
Ndithetha isiXhosa

Y

Yiddish
איך רעד יידיש

Yoruba
Mo mo YooBa

Z

Zulu
Ngiyasikhuluma isiZulu



**FLORIDA DEPARTMENT
OF CHILDREN AND FAMILIES**
MYFLFAMILIES.COM

Free Communication Assistance

Title VI of the Civil Rights Act of 1964 requires the Department of Children and Families to take reasonable steps to provide meaningful access to its programs and activities for persons with limited English proficiency.

I Speak is provided by the Department of Homeland Security Office for Civil Rights and Civil Liberties (CRCL). Other resources at www.lep.gov

Contact the Office for Civil Rights at
HQW.OFFICE.OF.CIVILRIGHTS.INFORMATION@myflfamilies.com for
digital copies of this poster. The DCF Operating Procedure METHODS OF
ADMINISTRATION: FOR FEDERAL FINANCIAL PARTICIPATION is available at
<http://www.myflfamilies.com/general-information/office-civil-rights>

FOUR FACTOR ANALYSIS

The Office of Civil Rights will lead the Department's Four-Factor Analysis to reduce language barriers that can preclude meaningful access by Limited English Proficient (LEP) persons to Department programs, benefits, services, or activities.

- A. Department's starting point is an individualized assessment that balances the following four factors:
 - (1) The number or proportion of LEP persons eligible to be served or likely to be encountered within the area serviced by FL DCF and its Providers.
 - (2) The frequency with which LEP persons come in contact with the program, benefit, service or activity.
 - (3) The nature and importance of the program, benefit, service, or activity to the LEP person. The more important the program, or the greater the possible consequences of the contact to the LEP persons the more likely language services are needed.
 - (4) The resources that are available and the costs of providing the language assistance service(s).
- B. Departmental programs should apply the four factors to the various kinds of contact that they have with the public to assess language needs and decide what reasonable steps they should take to ensure meaningful access for LEP persons.
- C. Language assistance measures may differ across the Department because some Departmental programs and activities have greater impact on or contact with LEP persons. Accurate and timely language assistance services are essential when denial or delay of access to services or information could have serious or even life-threatening implications for the LEP person. Moreover, the more frequent the contact with a particular language group, the more likely the need for enhanced language services in that language.
- D. Programs are encouraged to develop a plan to provide language services to LEP persons even when LEP individuals receive services on an unpredictable or infrequent basis. Smaller providers with more limited budgets are not expected to provide the same type of language services as larger providers with larger budgets. However, the Department must ensure benefits, activities, programs, and services are available to LEP persons.
- E. Resource and cost issues can often be reduced by:
 - (1) Using technological advances such as available communications technology and services;
 - (2) Sharing of language assistance materials and services;
 - (3) Reasonable business practices such as training multilingual staff to act as interpreters and translators; and,
 - (4) Using telephonic and video conferencing of interpretation services.

MULTILINGUAL STAFF ASSESSMENT

ASSESSING MULTILINGUAL STAFF						
Tasks Generally Performed by MULTILINGUAL Employees	TIER I			TIER II		
	Listening	Speaking	Interpretation	Reading*	Writing*	Translation
Interpretation & Direct "In Language" Communications						
Identify whether an individual is LEP and his/her primary language	X	X				
Greet LEP individuals in non-English language but without engaging in substantive conversation	X	X				
Field brief "in-language" phone calls with LEP individuals received through the main number or hotline	X	X				
Return brief "in-language" phone calls to LEP individuals	X	X				
Interpret voice messages to/from LEP individuals	X	X	X			
Conduct lengthy "in-language" phone conversation with LEP individual	X	X				
Interpret lengthy phone conversations with LEP individuals	X	X	X			
Interview LEP victims or witnesses "in-language"	X	X				
Interpret during interviews of LEP victims or witnesses	X	X	X			
Assist "in-language" on cases/matters in which language skills can be useful in addition to, not in place of, an interpreter	X	X				

Reading & Translation						
Read non-English language materials received (e.g., citizen letters, media)				X		
Summary translate non-English language materials into English			X	X		X
Draft short documents and correspondence directly in non-English Language				X	X	
Draft vital documents, lengthy responses and other correspondence directed at LEP individuals into non-English language (e.g. letters, notices, release of claims) directly into non-English language				X	X	
Translate short documents (e.g., citizen letters), or phrases within documents into English				X	X	X
Translate vital documents, lengthy responses and other correspondence directed at LEP individuals into non-English language (e.g., letters, notices, release of claims)				X	X	X
Summary translate English DOJ documents into non-English language				X	X	X
Translate outreach material, including web content				X	X	X