

**TITLE VI CIVIL RIGHTS COMPLIANCE CHECKLIST
PRELIMINARY AND ONGOING SELF-ASSESSMENT**
Department of Human Services

ASSESSMENT AREA		YES	NO	N/A
c.	Is multilingual staff culturally competent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Has DHS developed clear compensation and retention policies for multilingual staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Has DHS participated in recruitment programs for multilingual staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	Are language navigators available in most offices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Obtaining competent and qualified interpreters:			
a.	Are DHS interpreters fluent in both languages and familiar with relevant vocabulary?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Do DHS interpreters possess the appropriate skills for the particular context?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Do DHS interpreters understand applicable ethical principles?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Are DHS interpreters culturally competent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Are there procedures to ensure that DHS interpreters are available in a timely manner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	Have DHS interpreters read and signed the Code of Ethics?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Training DHS Staff:			
a.	Is DHS staff trained in DHS policies and procedures for obtaining language assistance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Is all staff trained to interact with LEP individuals and their interpreters?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Does staff receive training in cultural competence?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Is DHS staff trained on complaint procedures for LEP clients alleging discrimination on the basis of national origin?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Are staff language access trainings scheduled at regular intervals to update staff knowledge and include new employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	Are annual site visits conducted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Translating Written Documents:			
a.	Are there procedures in place for identifying vital documents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Are there procedures in place for ensuring that translations are accurate and understood by target populations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Is there a mechanism to track and update translated documents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Has DHS created a plan to disseminate vital translated documents internally?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Has DHS created a plan to disseminate vital translated documents to the broader public?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS: _____				
Evaluating DHS' Language Access Plan				
9.	Ongoing Monitoring, Feedback and Improvement:			
a.	Is DHS staff dedicated to monitoring or providing technical assistance to Language Access Plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Are evaluations scheduled at regular intervals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Does DHS solicit feedback from community-based organizations on a regular basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Does DHS survey its LEP clients on a regular basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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ASSESSMENT AREA	YES	NO	N/A
<p>10. Ongoing Data Collection:</p> <p>a. Are DHS staff and contractors dedicated to collecting program data? <input type="checkbox"/></p> <p>b. Do DHS and its contractors collect data on the number of LEP individuals served? <input type="checkbox"/></p> <p>c. Do DHS and its contractors collect demographic data on LEP individuals served or number of encounters? <input type="checkbox"/></p> <p>d. Do DHS and its contractors monitor how much is spent on its LEP plan? <input type="checkbox"/></p> <p>11. Is there a <u>Task Force or Oversight Committee</u> that assists DHS in monitoring and implementing the Language Access Plan? <input type="checkbox"/></p> <p>COMMENTS: _____</p>			
<p>Resolving Complaints</p> <p>12. Establishing Complaint Procedures:</p> <p>a. Has DHS developed procedures for investigating complaints alleging discrimination on the basis of national origin? <input type="checkbox"/></p> <p>b. Are complaint procedures translated and accessible to LEP clients? Posted signs at intake areas <input type="checkbox"/> Resource areas <input type="checkbox"/> Client file <input type="checkbox"/> Written notices <input type="checkbox"/> Explained during orientation/intake <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/></p> <p>COMMENTS: _____</p>			
<p>Conducting Ongoing Outreach to LEP Residents</p> <p>13. Has DHS and its contractors established partnerships with community-based or advocacy organizations to increase LEP participation? <input type="checkbox"/></p> <p>14. Has DHS established partnerships with community-based or advocacy organizations to advertise multilingual employment opportunities? <input type="checkbox"/></p> <p>15. Has DHS publicized its program(s) through ethnic media? <input type="checkbox"/></p> <p>COMMENTS: _____</p>			
<p>Building External and Internal Support for Equal Access Policies</p> <p>16. Are there funds dedicated to providing language access services at DHS? <input type="checkbox"/></p> <p>17. Is middle and senior management aware of and dedicated to providing language access to LEP individuals? <input type="checkbox"/></p> <p>COMMENTS: _____</p>			

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ASSESSMENT AREA	YES	NO	N/A
21. Contact information for person(s) responsible for completing this Self-Assessment:			
Last Name			
First Name			
Street Address			
City, State, Zip Code			
Mailing Address: <i>(If Different From Above)</i>			
Telephone Number			
Fax Number			
E-Mail Address			
_____	_____		
Signature	Date		

TITLE VI CIVIL RIGHTS COMPLIANCE CHECKLIST
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POLICIES, PROCEDURES, PROCESS COMPLIANCE - MONITORING CONTRACTORS

Contract Number _____ Total Award Amount _____

Contract Period _____ Date _____

Contractor Name & Address _____

1. Do DHS and its contractors have written policies or procedures in place for notifying program beneficiaries how to file complaints alleging discrimination with the HCRC, EEOC and OCR? YES
 NO
 N/A
2. How does DHS and its contractors notify program participants and beneficiaries that they do not discriminate on the basis of race, color, national origin, religion, sex, disability, and age in the delivery of services?

COMMENTS: _____

3. How do DHS and its contractors notify employees that they do not discriminate on the basis of race, color, national origin, religion, sex, and disability in employment practices?

COMMENTS: _____

4. Has DHS complied with the requirements to submit to the appropriate OCR any findings of discrimination against DHS or its contractors issued by a federal or state court or federal or state administrative agency on the basis of race, color, religion, national origin, or sex? YES
 NO
 N/A

5. Do DHS and its contractors conduct any training for their employees on the requirements under federal civil rights laws? YES
 NO
 N/A

6. Do DHS and its contractors need any civil rights training or technical assistance regarding its duties to comply with applicable civil rights laws: YES
 NO
 N/A

7. What steps have DHS and its contractors taken to provide meaningful access to its programs and activities to persons who have limited English proficiency (LEP)?

COMMENTS: _____

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POLICIES, PROCEDURES, PROCESS COMPLIANCE - MONITORING CONTRACTORS (CONTINUED)

8. Do DHS and its contractors have a written policy on providing language access services to LEP persons? YES
 NO
 N/A

Please provide below contact information for person responsible for submitting any findings of discrimination to the appropriate Office of Civil Rights (OCR):

a. WATTS, D. Geneva Phone: (808) 586-4955
Civil Rights Compliance Officer Fax: (808) 586-4990
Department of Human Services E-Mail: gwatts@dhs.hawaii.gov
P. O. Box 339
Honolulu, Hawaii 96809-0339

9. DHS has more than 50 employees and receives DOJ funding of \$25,000 or more. Has DHS and its contractors taken the following actions:
- a. Adopted grievance procedures that incorporate due process standards and provide for prompt and equitable resolution of complaints alleging violation of DOJ regulations implementing Section 504 of the Rehabilitation Act of 1973, found at 28 C.F.R. Part 42, Subpart G., which prohibits discrimination on the basis of a disability in employment practices and in delivery of services? YES
 NO
 N/A
- b. Designated a person to coordinate compliance with the prohibitions against disability discrimination contained in 28 C.F.R. Part 42, Subpart G? YES
 NO
 N/A
- c. Notified participants, beneficiaries, employees, applicants, and others that DHS and its contractors do not discriminate on the basis of disability? YES
 NO
 N/A

10. DHS operates an education program or activity. Has DHS and its contractors:
- a. Adopted grievance procedures that provide for prompt and equitable resolution of complaints alleging violation of DOJ regulations implementing Title IX of the Education Amendments of 1972, found at 28 C.F.R. Part 54, which prohibits discrimination on the basis of sex? YES
 NO
 N/A
- b. Designated a person to coordinate compliance with the prohibitions against sex discrimination contained in 28 C.F.R. Part 54? YES
 NO
 N/A

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POLICIES, PROCEDURES, PROCESS COMPLIANCE - MONITORING CONTRACTORS (CONTINUED)

- c. Notified applicants for admission and employment, employees, students, parents, and others that DHS and its contractors do not discriminate on the basis of sex in its educational programs and activities? YES
 NO
 N/A
11. When DHS or its contractors provide for or conducts activities as part of its programs or services, does DHS or its contracts do the following:
- a. Provide services to everyone regardless of religion or religious belief? YES
 NO
 N/A
- b. Ensure that DHS and its contractors do not use federal funds to conduct inherently religious activities, such as prayer, religious instruction, or proselytization, and that such activities are kept separate in time or place from federally-funded activities? YES
 NO
 N/A
- c. Ensure that participation in religious activities is voluntary for beneficiaries of federally-funded programs? YES
 NO
 N/A

Comments: _____

Beginning and End Dates of Next Evaluation Period: _____

Goals for Next Evaluation Period: _____

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POLICIES, PROCEDURES, PROCESS COMPLIANCE - MONITORING CONTRACTORS (CONTINUED)

Comments About Goals: _____

- 12. During this monitoring period has DHS and its contractors submitted a current Equal Employment Opportunity Plan (EEOP) in accordance with 28 C.F. R., section 42.301-308? YES
 NO
 N/A

- 13. Has DHS and its contractor submitted an EEOP Short form to the Office of Civil rights, if required by 28 C.F.R., Section 42.301-308? YES
 NO
 N/A
 - a. If DHS or its contractors are not required to submit an EEOP Short Form to the appropriate OCR, have they submitted a certification form to the OCR claiming a partial or complete exemption from the EEOP requirements? YES
 NO
 N/A

 - b. If DHS or its contractors prepared an EEOP Short form, on what date did DHS or its contractor prepare it? YES
 NO
 N/A

Comments: _____

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POLICIES, PROCEDURES, PROCESS COMPLIANCE - MONITORING CONTRACTORS (CONTINUED)

14. Please provide the contact information for the person responsible for completing this checklist:

Last Name _____
First Name _____
Street Address _____
City, State, Zip Code _____
Mailing Address _____
(If Different From Above) _____
Telephone Number _____
E-mail Address _____

Monitor Signature Date