

Employ MilwaukeeAdministrative MemoIssue Date1-14-20#Rev 18-0520-4

| | | Routing | CEO | EVP | CFO |
|---------------------|---|---|-----|-----|-----------|
| REVISION OF # 18-05 | | | СРО | CDO | ALL STAFF |
| то: | Employ Milwaukee Staff and Subrect | Employ Milwaukee Staff and Subrecipient Staff | | | |
| FROM: | Carrie A. Hersh Contracts Compliance Specialist/ EO Officer | | | | |
| RE: | Employ Milwaukee Limited English Proficiency (LEP) Access Requirements Statement | | | | |
| PURPOSE: | This policy statement outlines the agency's policy on access requirements for persons with Limited English Proficiency. | | | | |
| BACKGROUND: | Employ Milwaukee, Inc., "the entity," is committed to providing equal opportunity in all programs, services and activities to individuals who do not speak English as their primary language and who have a limited ability to read, write, speak or understand English. Those individuals are referred to as limited English proficient, or "LEP." Meaningful access to federally funded programs and activities is required by Title VI of the Civil Rights Act of 1964 and its implementing regulations. | | | | |
| REVISION: | Equal Opportunity Officer, LEP Contact change. Attachment is revised | | | | |
| ANALYSIS: | Meaningful access to information for individuals with LEP is provided in two ways: oral interpretation and written translation. Oral interpretation can range from on-site interpreters | | | | |

interpretation and written translation. Oral interpretation can range from on-site interpreters for critical services provided to a high volume of persons with LEP to access through commercially-available telephonic interpretation services. Written translation can range from translation of an entire document to translation of a short description of the document.

POLICY:

The entity requires its subrecipients to comply with this LEP Access Requirements Statement. The entity fulfills the obligation of providing meaningful access to information for individuals with LEP by requiring subrecipients to do one or more of the following: hiring bilingual staff, hiring staff interpreters/translators, contracting for interpreters/translation services, using telephone interpreter lines, and/or using community volunteers. The entity and subrecipients understand that the interpretation/translation must be performed in a competent, confidential, ethical, and accurate manner at no cost to the individual with LEP.

The entity and subrecipients do not rely on the person with LEP to provide an interpreter. If a person with LEP requests to use a family member, friend or other adult as an interpreter, the entity or entity's subrecipient makes the person with LEP aware that the entity will provide a qualified interpreter at no cost to the person with LEP. The entity and subrecipients respect the person with LEP's choice of interpreters. If the person with LEP chooses a family member, friend, or other adult to interpret instead of one provided by the subrecipient, the subrecipient makes a record of that decision. If the subrecipient believes the interpreter selected by the individual with LEP is not competent or appropriate, the entity may supplement with its own qualified interpreter. Minors should not act as interpreters unless there is an emergency situation and another interpreter is not immediately available.

The subrecipient records the number and date of instances in which interpretation was offered, what service was offered (e.g., staff, in-person contracted, telephone, etc.), whether it was accepted or whether the individual with LEP selected their own interpreter, and in what language group the service was needed.

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This entity monitors its changing demographics and population trends on an annual basis, to ensure awareness of the language needs in its service area. To assist subrecipients in complying with all applicable limited English proficiency rules, regulations and guidelines, the entity's LEP Coordinator is:

Name: Carrie A. Hersh, LEP Coordinator Phone: 414-270-1726

LEP customers are encouraged to ask for language assistance or discuss any perceived discrimination problems. Information about discrimination complaint resolution process is available upon request.

CONTACT: Carrie A. Hersh, Equal Opportunity Officer, Carrie.hersh@employmilwaukee.org

ATTACHMENT(S): LEP Acknowledgement and Refusal of Free Interpretation Services Form

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LIMITED ENGLISH PROFICIENCY (LEP) ACKNOWLEDGEMENT AND REFUSAL OF FREE INTERPRETATION SERVICES FORM

| Name | | Date of Birth | |
|-----------------|---------------------------------------|-----------------|--|
| | | | |
| WIOA Program | Adult Dislocated Worker | ASSET PIN | |
| (if applicable) | Out-of-School Youth I In-School Youth | (if applicable) | |

(Provider Name) ______ has offered you free interpretation and translation services provided by a skilled and qualified interpreter who is trained to protect your privacy. That person understands your language and technical/legal words related to the program or service you are seeking or receiving.

You have the right to the free interpreter services described above. You also have the right to refuse that service and proceed with your own interpreter. YOU ARE NOT REQUIRED TO PROVIDE YOUR OWN INTERPRETER.

If you choose to utilize your own interpreter, whether a family member or another person, that person may not have formal training and may commit, among others, the following errors:

- · Give you or your service provider incorrect information;
- · Add or leave out information;
- · Learn information about you that you may not wish to be known;
- · Tell other people information about you that would otherwise be private; or
- Misunderstand your Career Planner, case worker, service or training provider, or other professional.

The above-named provider has explained to me, in my own language, the risks of refusing the offered trained interpreter. I understand these risks and choose to decline the interpretation services offered at no cost.

| Individual Signature | Date Signed |
|---|-------------|
| | |
| Interpreter Signature OR Name and # (if interpreted by phone) | Date Signed |
| | |
| Staff Signature | Date Signed |

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Employ Milwaukee is an Equal Opportunity Employer and Service Provider. Auxiliary aids and services are available upon request to individuals with disabilities. If you need this information interpreted to a language you understand or in a different format, please contact Elizabeth Jankowski, Equal Opportunity Officer, at 414-270-1759 or <u>Elizabeth Jankowski@EmployMilwaukee.org</u>. Callers who are deaf or hearing or speech-impaired may reach us at Wisconsin Relay Number 711.

IMPORTANT! This document contains <u>important information</u> about your rights, responsibilities and/or benefits. It is critical that you understand the information in this document, and we will provide the information in your preferred language at no cost to you. **Call (414)-270-1759** for assistance in the translation and understanding of the information in this document.

;IMPORTANTE! Este documento contiene <u>información importante</u> sobre sus derechos, responsabilidades y/o beneficios. Es importante que usted entienda la información en este documento. Nosotros le podemos ofrecer la información en el idioma de su preferencia sin costo alguno para usted. Llame al (414)-270-1759 para pedir asistencia en traducir y entender la información en este documento.

TSEEM CEEB! Daim ntawv no muaj ib <u>cov lus tseem ceeb</u> qhia paub txog koj cov cai, cov luag hauj lwm thiab/los yog cov kev pab. Nws yog ib qho tseem ceeb uas koj yuav tau to taub cov lus nyob hauv daim ntawv no, thiab peb yuav muab tau cov lus no txhais ua koj hom lus yam koj tsis tau them nyiaj dab tsi. Hu rau (414)-270-1759 yog xav tau kev pab kom muab cov lus nyob hauv daim ntawv no txhais rau koj kom koj to taub.