

# Dodge County Human Services and Health Department

## Title VI/ADA Nondiscrimination Plan

Revised on: November 18, 2024

Adopted by: Dodge County Administrator

Adopted on: June 20, 2014

*This plan is hereby adopted and signed by:*

### Dodge County Human Services and Health Department

Executive Name/Title: Cameron Clapper  
Dodge County Administrator

Executive Signature:



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As a recipient of USDOT Federal Transit Administration (FTA) funding, per [FTA Circular 4702.1B](#) Dodge County Human Services and Health Department is required to prepare a Title VI/ADA Nondiscrimination Plan including the following elements:

- Evidence of Policy Approval
- Policy Statement, Log of Policy Updates, Contact Information/Program Administration
- Notice of Nondiscrimination (**Appendix 1**)
- Complaint Procedure (**Appendix 2**)
- Complaint Log (**Appendix 3**)
- Complaint Form (**Appendix 4**)
- Public Involvement Plan (**Appendix 5**)
- Limited English Proficiency (LEP) Plan (**Appendix 6**)
- Limited English Proficiency LEP Tools (**Appendix 7**)
- Demographic Representation Information (**Appendix 8**)
- Translated Documents in Spanish
  - Notice of Nondiscrimination
  - Complaint Procedure
  - Complaint Form

## Policy Statement

Dodge County Human Services and Health Department is committed to ensuring that no person is excluded from the participation in, denied the benefits of, or otherwise subjected to discrimination on the basis of race, color, national origin, disability, sex, age, religion, income status or limited English proficiency (LEP) in any and all programs, activities or services administered by Dodge County Human Services and Health Department in accordance with Title VI of the Civil Rights Act of 1964<sup>1</sup> and related nondiscrimination authorities.

The Dodge County Human Services and Health Department receives federal financial assistance to provide county wide transportation service in Dodge County and to purchase vehicles to provide rides to elderly (age 65 and over) and disabled individuals.

## Policy Updates – Activity Log

**Dodge County Human Services and Health Department** will review its policy on an annual basis to determine if modifications are necessary. The table below outlines the Title VI/ADA Plan reviews/revisions made by **Dodge County Human Services and Health Department**.

Date	Activity (Review/Update/Addendum/ Adoption/Distribution)	Person Responsible	Notes
November 6, 2024	Updated Title VI/ADA Plan per WisDOT requirement. Revisions included updated Complaint Form, updated LEP Plan and Minority Representation Information with current US Census data	Carrie Lagerman	
June 15, 2019	Update Title VI Plan	Steve Edwards	
June 20, 2014	Develop FTA Compliant Title VI/ADA Plan	Melanie McDonald	

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<sup>1</sup> **Title VI of the Civil Rights Act of 1964** states “No person in the United States shall, on the grounds of race, color or national origin, be excluded from, participation in, denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.” – [Title 42 USC Section 2000d](#)

## Contact Information/Program Administration

### Chief Executive

Dodge County Human Services and Health Department's Chief Executive will ensure compliance with [Title VI of the Civil Rights Act of 1964 \(42 U.S.C. 2000d\)](#) and the U.S. Department of Transportation implementing regulations.

<b>Name:</b>	Cameron Clapper
<b>Email:</b>	<a href="mailto:cclapper@co.dodge.wi.us">cclapper@co.dodge.wi.us</a>
<b>Phone:</b>	(920)386-4251

### Civil Rights Coordinator

Dodge County Human Services and Health Department's Civil Rights Coordinator ensures Title VI/Nondiscrimination and LEP compliance in accordance with Dodge County Human Services and Health Department's federally funded transportation activities. The Civil Rights Coordinator has other duties and responsibilities in addition to Title VI/Nondiscrimination and LEP compliance. This position has a direct reporting relationship and access to Dodge County Human Services and Health Department's Chief Executive.

<b>Name:</b>	Carrie Lagerman
<b>Email:</b>	<a href="mailto:clagerman@co.dodge.wi.us">clagerman@co.dodge.wi.us</a>
<b>Phone:</b>	(920) 386-4206

The Civil Rights Coordinator is responsible for initiating, monitoring, and ensuring compliance of Dodge County Human Services and Health Department's nondiscrimination requirements, including the following activities:

- ✓ Program Administration
  - Ensure compliance with federal Title VI/Nondiscrimination and LEP requirements.
  - Develop and implement Dodge County Human Services and Health Department's Title VI/Nondiscrimination and LEP Plan.
  - Update and maintain Title VI/Nondiscrimination and LEP program policies and procedures.
- ✓ Complaints
  - Review, track, investigate and close Title VI/Nondiscrimination and LEP complaints.
- ✓ Employee Training
  - Educate staff on Title VI/Nondiscrimination and LEP requirements and procedures.
- ✓ Reporting
  - Prepare and submit Title VI/Nondiscrimination reports per state and federal regulations.
- ✓ Public Dissemination
  - Notify the public of Dodge County Human Services and Health Department's Nondiscrimination requirements via Dodge County Human Services and Health Department's public area, on its website, in vehicles, etc.
- ✓ Oversight
  - Ensure contractors and lessees adhere to Title VI/Nondiscrimination and LEP requirements.

## Notice of Nondiscrimination

FTA Title VI Circular 4702.1B requires Dodge County Human Services and Health Department as a recipient of federal financial assistance to notify the public of its obligations under U.S. DOT Title VI regulations and the protections against discrimination afforded to them by Title VI.

Title VI and ADA regulations require Dodge County Human Services and Health Department to inform the public of their rights under Title VI and ADA by posting a *Notice of Nondiscrimination*. The *Notice of Nondiscrimination* should be posted in the following locations: agency website, public areas of the agency office, and as applicable, inside vehicles, rider guides/schedules, and transit shelters/facilities.

The public notice must include a statement of nondiscrimination, information on how to request additional information about the agency's Title VI and ADA obligations, including information on how to file a complaint, the location of the complaint form, etc., and information on how to request Title VI and ADA information in another language.

Dodge County Human Services and Health Department's *Notice of Nondiscrimination* is provided in the following locations:

- ✓ Agency website <https://www.co.dodge.wi.gov/departments/departments-a-d/aging-and-disability-resource-center/transportation>
- ✓ Public area of the agency office (common area, public meeting rooms, etc.)
- ✓ Inside vehicles
- ✓ Rider Guides/Schedules

On English versions of the *Notice of Nondiscrimination*, a sentence is included in Spanish and Hmong to contact the Dodge County Human Services and Health Department at 920-386-3500 if additional information is needed in another language.

To view a copy of the Dodge County Human Services and Health Department's *Notice of Nondiscrimination*, please see **Appendix 1**.

## Complaint Procedure, Complaint Log, and Complaint Form

Dodge County Human Services and Health Department, as a recipient of federal financial assistance must develop a procedure for investigating, tracking, and resolving Title VI/Nondiscrimination and LEP complaints and make the procedures available to the public upon request.

Any person, group or firm that believes they've been discriminated against on the basis of race, color, national origin, disability, sex, age, religion, income status or limited English proficiency (LEP) by Dodge County Human Services and Health Department may file a civil rights complaint.

### Scope of Civil Rights Complaints

The scope of civil rights complaints covers all internal and external Dodge County Human Services and Health Department activities. Adverse impacts resulting in civil rights complaints can arise from many sources including the delivery of programs and services, or advertising, bidding, and contracts.

Complaints can originate as a result of project and program impacts on individuals or groups. Examples include social and economic impacts such as access to programs, activities and services, failure to maintain facilities and vehicles, traffic, noise, air quality, and accidents.

Complaints can also originate from individuals or firms alleging inability to bid upon or obtain a contract with Dodge County Human Services and Health Department for the furnishing of goods and services. Examples include advertising for bid proposals; prequalification or qualification requirements; bid awards; selection of contractors, subcontractors, material and equipment suppliers, lessors, vendors, consultants, etc.

**Dodge County Human Services and Health Department's** complaint procedure is shown in **Appendix 2** and made available in the following locations:

- ✓ Agency website, either as a reference in the *Notice of Nondiscrimination* or in its entirety
- ✓ Agency office (common area, public meeting rooms, etc.)

### Civil Rights Investigations

Recipients of federal financial assistance are required to maintain a list of any complaints alleging discrimination. The list shall include the date the civil rights complaint, investigation, or lawsuit was filed, a summary of the allegation(s), the status of the complaint, investigation, or lawsuit, actions taken by the recipient in response, and final findings related to the complaint, investigation, or lawsuit.

**Appendix 3** is Dodge County Human Services and Health Department's *Complaint Log* procedure and tracking mechanism to investigate, track and resolve complaints.

Since the last update of this Title VI/ADA Nondiscrimination Plan, there has been no transportation related civil rights investigations, complaints, or lawsuits filed with Dodge County Human Services and Health Department.

### Complaint Form

Dodge County Human Services and Health Department's *Complaint Form* is shown in **Appendix 4**.

## **Public Involvement Plan**

Recipients of federal financial assistance are required to develop a public involvement plan that includes outreach strategies and participation techniques to engage the public including minority, low-income, and limited English proficient (LEP) populations, as well as a summary of outreach efforts made since the last Title VI/ADA Nondiscrimination Plan.

While traditional means of seeking public involvement may not reach all individuals, or might not allow for meaningful avenues of input, the intent of this effort is to take reasonable actions to provide opportunities for historically under-served populations to participate in transportation decision making efforts.



The Dodge County Human Services and Health Department's *Public Involvement Plan* is shown in **Appendix 5**.

### **Limited English Proficiency (LEP) Plan**

As a recipient of federal USDOT funding, Dodge County Human Services and Health Department is required under [Title VI of the Civil Rights Act of 1964](#) and [Executive Order 13166](#) to develop and implement a plan to ensure accessibility to its programs and services for persons who are not proficient in the English Language.

Dodge County Human Services and Health Department's *Limited English Proficiency (LEP) Plan* is shown in **Appendix 6**.

The LEP plan outlines the policies and procedures Dodge County Human Services and Health Department will use to address the needs of persons with limited English proficiency (LEP) that wish to participate in Dodge County Human Services and Health Department programs and services.

### **Demographic Representation Information**

Dodge County Human Services and Health Department understands that diverse representation on boards, councils, and committees results in sound policy reflective of the needs of the entire population. [FTA Title VI Circular 4702.1B](#) requires recipients which have transportation-related, non-elected boards, advisory council or committees, or similar bodies, to report membership of these committees broken down by race and include a description of efforts made to encourage the participation of minorities on these committees.

Dodge County Human Services and Health Department's *Minority Representation Information* is shown in **Appendix 7**.

## Notice of Nondiscrimination to the Public

Dodge County's *Notice of Nondiscrimination* is posted in the following areas:

- ✓ Public area of the agency office
- ✓ Inside vehicles
- ✓ Rider Guides/Schedules

## Notice of Nondiscrimination

### Dodge County Human Services and Health Department

- ✓ **Dodge County Human Services and Health Department** is committed to ensuring that no person is excluded from the participation in, denied the benefits of, or otherwise subjected to discrimination on the basis of race, color, national origin, disability, sex, age, religion, income status or limited English proficiency (LEP) in any and all programs, activities, or services administered by **Dodge County Human Services and Health Department** in accordance with Title VI of the Civil Rights Act of 1964 and related nondiscrimination authorities.
- ✓ Any person who believes they've been aggrieved by any unlawful discriminatory practice may file a complaint with **Dodge County Human Services and Health Department**.
- ✓ For more information on **Dodge County Human Services and Health Department's** civil rights program, and the procedures to file a complaint, contact 920-386-3500, toll free at 1-800-924-6407 fax at (920) 386-4015; email [hsagingunit@co.dodge.wi.us](mailto:hsagingunit@co.dodge.wi.us) (for hearing impaired, please use [Wisconsin Relay 711 - https://wisconsinrelay.com](https://wisconsinrelay.com) or visit our administrative office at 199 County Road DF, Juneau, WI 53039. For more information, visit <https://www.co.dodge.wi.gov/departments/departments-a-d/aging-and-disability-resource-center/transportation>
- ✓ A complaint may also be filed directly with the following:
  - Wisconsin Department of Transportation (WisDOT), Senior Title VI and ADA Coordinator, Phone: (608) 266-8129, TTY (800) 947-3529, Fax: (608)267-3641, Email: [taqwanya.smith@dot.wi.gov](mailto:taqwanya.smith@dot.wi.gov), 4822 Madison Yards Way, 5<sup>th</sup> Floor South, Madison, WI 53705. For more information, visit <https://wisconsindot.gov/Pages/doing-bus/civil-rights/titlevi-ada/filingcomplaint.aspx>
  - U.S. Department of Transportation, Federal Transit Administration (FTA), Office of Civil Rights, 1200 New Jersey Avenue SE, Washington, DC 20590, Phone: 1-888-446-4511 or 711(Relay), email: [FTACivilRightsCommunications@dot.gov](mailto:FTACivilRightsCommunications@dot.gov)
- ✓ If information is needed in another language, contact 920-386-3500 or 1- 800-924-6407.  
Si se necesita informacion en otro idioma de contacto, 920-386-3500 or 1-800-924-6407.  
Yog muaj lus qhia ntxiv rau lwm hom lus, hu rau 920-386-3500 or 1-800-924-6407.

### Website Statement:

Dodge County Human Services and Health Department operates its programs and services without regard to race, color, national origin, disability, sex, age, religion, income status or limited English proficiency (LEP) in accordance with Title VI of the Civil Rights Act, Americans with Disabilities Act (ADA), and related nondiscrimination authorities. For more information on the Dodge County Human Services and Health Department's civil rights program, ADA obligations, and the procedures to file a complaint, contact [hsagingunit@co.dodge.wi.us](mailto:hsagingunit@co.dodge.wi.us), 920-386-3500, toll free at 1- 800-924-6407. For hearing impaired, please use Wisconsin Relay 711 service <https://wisconsinrelay.com>.

### Complaint Procedure

Dodge County Human Services and Health Department's Complaint Procedure is made available in the following locations:

- ✓ Agency website, either as a reference in the *Notice of Nondiscrimination* or in its entirety
  - ✓ Agency office (common area, public meeting rooms, etc.)
  - ✓ Available in appropriate languages for LEP populations, meeting the Safe Harbor Threshold
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Any person who believes they've been discriminated against on the basis of race, color, national origin, disability, sex, age, religion, income status, or limited English proficient (LEP) by Dodge County Human Services and Health Department may file a complaint by completing and submitting Dodge County Human Services and Health Department's Complaint Form.

The Complaint Form may also be used to submit general complaints to Dodge County Human Services and Health Department.

Dodge County Human Services and Health Department investigates complaints received no more than 180 calendar days after the alleged incident. Dodge County Human Services and Health Department will process complaints that are complete.

Once the complaint is received, Dodge County Human Services and Health Department will review the complaint and work to resolve the complaint informally, if possible.

If the complaint warrants a formal civil rights complaint process, Dodge County Human Services and Health Department will follow the steps listed in this complaint procedure. Dodge County Human Services and Health Department may also use this formal procedure to address general complaints. If Dodge County Human Services and Health Department determines it has jurisdiction the complainant will receive an acknowledgement letter stating the complaint will be investigated by Dodge County Human Services and Health Department as a civil rights complaint.

Dodge County Human Services and Health Department has **30** business days to investigate the civil rights complaint. If more information is needed to resolve the case, Dodge County Human Services and Health Department may contact the complainant.

The complainant has 14 business days from the date of the letter to send requested information to the investigator assigned to the case.

If the investigator is not contacted by the complainant or does not receive the additional information within 14 business days, Dodge County Human Services and Health Department can administratively close the case. A case can be administratively closed also if the complainant no longer wishes to pursue their case.

After the investigator reviews the complaint, one of two (2) letters will be issued to the complainant: a closure letter or a letter of finding (LOF).

- ✓ A closure letter summarizes the allegations and states that there was not a Title VI or ADA violation and that the case will be closed.
- ✓ A letter of finding (LOF) summarizes the allegations and the interviews regarding the alleged incident, and explains whether any disciplinary action, additional training of the staff member, or other action will occur.



If the complainant wishes to appeal the decision, the complainant has **14** business days after the date of the letter or the LOF to do so.

A person may also file a complaint directly with the Federal Transit Administration, at FTA Office of Civil Rights, 1200 New Jersey Avenue SE, Washington, DC 20590.

If information is needed in another language, then contact 920-386-3500 or 1-800-924-6407.

Si se necesita informacion en otro idioma de contacto, 920-386-3500 or 1-800-924-6407.

Yog muaj lus qhia ntxiv rau lwm hom lus, hu rau 920-386-3500 or 1-800-924-6407.

## Appendix 3

### Complaint Log

#### List of Complaints, Investigations and Lawsuits<sup>2</sup>

Dodge County Human Services and Health Department maintains a log to track and resolve transportation related civil rights complaints, investigations, and lawsuits.

#### Check One:

☒ Since the last update of this Title VI/ADA Nondiscrimination Plan, there has been no transportation related civil rights investigations, complaints, or lawsuits filed with Dodge County Human Services and Health Department.

- Because Dodge County Human Services and Health Department has had no transportation related civil rights complaints, investigations, or lawsuits, the table below has no entries.

☐ There has been transportation related civil rights investigations, complaints and/or lawsuits filed against us. *See list below. Attach additional information as needed.*

**Note:** The performance measure for tracking when an investigation begins and when its administratively closed is documented in the **Complaint Log** table below. **Dodge County Human Services and Health Department** will strive to complete the investigation within the timeframe specified in its **Complaint Procedure**.

Type Complaint Investigation Lawsuit	Date Complaint Received (Month, Day, Year)	Complainant's Contact Information Name/Phone/ Email/Address	Basis of Complaint <sup>3</sup>	Summary Complaint Description	Action Taken/ Final Outcome if Resolved  List dates of action steps including the dates complaint/ investigation begins and is administratively closed.	Status  Open/ Closed

<sup>2</sup> **Lawsuit:** The protected class under Title II is disability. The protected classes under Title VI are Race, Color and Nation Origin.

<sup>3</sup> **Basis of Complaint:** Specify Race, Color, National Origin, Disability, Religion, Sex, Age, Service, Income Status, Limited English Proficient (LEP), Safety, Other

## Complaint/Comment Form

Dodge County Human Services and Health Department is committed to providing you with safe and reliable transportation services and we want your feedback. Please use this form for suggestions, compliments, and complaints. Please submit this form in person, electronically or by mail at the address below:

Dodge County Human Services and Health Department  
199 County Road DF  
Juneau, WI 53039  
[hsaging@co.dodge.wi.us](mailto:hsaging@co.dodge.wi.us)

You may also call us at 920-386-3500 or 1-800-924-6407. Please make sure to provide your contact information in order to receive a response.

### Section A: Accessible Format Requirements

Please check the preferred format for this document

<input type="checkbox"/> Large Print	<input type="checkbox"/> TDD or Relay	<input type="checkbox"/> Audio Recording	<input type="checkbox"/> Other (if selected please state what type of format you need in the box below)
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Click or tap here to enter text.

### Section B: Contact Information

Name Click or tap here to enter text.	Telephone Number (including area code) Click or tap here to enter text.
Address Click or tap here to enter text.	City Click or tap here to enter text.
State Click or tap here to enter text.	Zip Code Click or tap here to enter text.

Email Address Click or tap here to enter text.

Are you filing this complaint on your own behalf?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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If no, please provide the name and relationship of the person for whom you are complaining and why you are completing the form on their behalf in the box below.

Click or tap here to enter text.

Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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## Section C: Type of Comment

What type of comment are you providing? Please check which category best applies.

<input type="checkbox"/> Complaint	<input type="checkbox"/> Suggestion	<input type="checkbox"/> Compliment	<input type="checkbox"/> Other
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Which of the following describes the nature of the comment? Please check one or more of the check boxes.

<input type="checkbox"/> Race	<input type="checkbox"/> Color	<input type="checkbox"/> National Origin	<input type="checkbox"/> Religion
<input type="checkbox"/> Age	<input type="checkbox"/> Sex	<input type="checkbox"/> Transportation Service	<input type="checkbox"/> Income Status
<input type="checkbox"/> Limited English Proficient (L.E.P)		<input type="checkbox"/> Americans with Disability Act (A.D.A)	

## Section D: Comment Details

Please answer the questions below regarding your comment

Did the incident occur on the following type of service? Please check any box that may apply.	<input type="checkbox"/> Paratransit	<input type="checkbox"/> Shared Ride Taxi	<input type="checkbox"/> Bus
What was the date of the occurrence?	Click to add date in the following format: Day, month, year		
What was the time of the occurrence?	Click to add the time		
What is the name or identification of the employee or employees involved?	Click or tap here to enter text.		
What is the name or identification of others involved, if applicable?	Click or tap here to enter text.		
What was the number or name of the route you were on, if applicable?	Click or tap here to enter text.		
What was the direction or destination you were headed to when the incident occurred, if applicable?	Click or tap here to enter text.		
Where was the location of the occurrence?	Click or tap here to enter text.		
Was the use of a mobility aid involved in the incident?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Please add any additional descriptive details about the incident.	Click or tap here to enter text.		

In the box below, please explain as clearly as possible what happened and why you believe you were discriminated against.

Click or tap here to enter text.

## Section E: Follow-up

May we contact you if we need more details or information?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If yes, how would you best liked to be reached? Please select your preferred form of contact below</b>		
<input type="checkbox"/> Phone	<input type="checkbox"/> Email	<input type="checkbox"/> Mail
<b>If you would prefer to be contacted by phone, please list the best day and time to reach you.</b>		
Click here to add your preferred time	Click here to add your preferred day	
Have you filed a complaint with any other federal, state, or local agencies?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If yes, list agencies and contact information (agency name, address, email, phone).</b>		
Click or tap here to enter text.		

## Section F: Desired Outcome

<b>Please list below, what steps you would like taken to address the conflict or problem.</b>
Click or tap here to enter text.

## Section G: Signature

<b>Please attach any documents you have which support the allegation. Then date and sign this form and send it to Dodge County Human Services and Health Department.</b>	
Name Click or tap here to enter text.	<b>Date:</b> Click to add date in the following format: Day, month, year
Signature Click or tap here to enter text.	

### Public Involvement Plan

The purpose of the **Public Involvement Plan** is to establish procedures that allow for, encourage, and monitor participation of all citizens within **Dodge County Human Services and Health Department** service area including but not limited to low income and minority individuals, and those with limited English proficiency (LEP).

While traditional means of soliciting public involvement may not reach such individuals, or might not allow for meaningful avenues of input, the intent of this effort is to take reasonable actions to provide opportunities for historically under-served populations to participate in transportation decision making efforts.

#### Goal

The goal of public involvement is to offer real opportunities for the engagement of all citizens within **Dodge County Human Services and Health Department** service area to participate in the development of plans, programs, and services.

#### Strategies

To promote inclusive public participation, **Dodge County Human Services and Health Department** uses the following strategies, as appropriate.

- Coordination and Consultation
  - Coordinate and consult with partners, stakeholders, program participants and their caregivers, and the public affected by the distribution of state and federal transit grant programs.
  - Seek guidance and input from WisDOT on public involvement mechanisms and strategies.
  - Maintain an electronic distribution list of all potential program participants, partners, stakeholders, etc.
- Accessibility and Information
  - Meetings
    - Adhere to state and federal public hearing requirements
    - Provide a general notification of meetings, particularly forums for public input, in a manner that is understandable to all populations in the area.
    - Hold meetings in locations which are accessible and reasonably welcoming to all area residents including, but not limited to, low-income and minority members of the public.
    - Employ different meeting sizes and formats
    - Provide avenues for two-way flow of information and input from populations which are not likely to attend meetings.
  - Make public information available in electronically accessible formats
  - Use social media in addition to other resources to gain public involvement
  - Use radio, television or newspaper ads on stations and in publications that serve LEP populations. Outreach to LEP populations may also include audio programming available on podcasts.



- Expand traditional outreach methods by visiting ethnic stores/markets and restaurants, community centers, libraries, faith-based institutions, local festivals, etc.
- Timeliness
  - Provide timely information about state and federal grant programs to affected program participants, the public, partner agencies, and other interested parties.
  - Provide adequate notice of public involvement activities and time for public review and comment.
- Public Comment
  - Work openly and diligently to incorporate public comments received and to notify respondents of final plans, reports, programs, etc.
  - Provide for early, frequent and continuous engagement by the public
- Social/Environmental Justice
  - Seek and consider the needs of those traditionally underserved by participating in outreach efforts that address the needs of minority persons, the elderly, persons with disabilities, limited English Proficient individuals, and low-income households.
  - Determine what non-English languages and other cultural barriers exist to public participation within **Dodge County Human Services and Health Department** service area.
- Training
  - Participate in training to continuously improve the knowledge and understanding of civil rights and environmental justice principles.
- Evaluation
  - Document and maintain records of public outreach efforts.
  - Review the effectiveness of public participation activities.
  - Seek new ways to providing public input opportunities.

## **Participation Techniques**

**Dodge County Human Services and Health Department** will use the following participation techniques as deemed appropriate. Participation techniques will be reviewed and modified each year, as necessary. If new techniques are tried and found to be successful, this list will be updated to include the new techniques.

- Booth at Community events (craft fair, festival, farmers market, parades, etc.)
- Advisory meetings and committees
- Direct mailings (letters, fliers, etc.)
- Website and social media
- Project-specific newsletter articles
- Public information meetings
- Legal advertisements
- Presentations to community partners, citizens/residents, etc.
- Press releases, meetings with local media representatives
- Surveys (telephone, internet, and public information meetings)
- Work with partner organizations

## Public Outreach Activities

**Dodge County Human Services and Health Department** maintains a log/record of the various types of outreach activities it uses to promote inclusive public participation. On an annual basis, **Dodge County Human Services and Health Department** reviews its log of outreach activities to determine if additional or different strategies are needed to promote inclusive public participation.

The direct public outreach and involvement activities conducted by **Dodge County Human Services and Health Department** are summarized below. Information collected on the size, location, meeting format, number of attendees, etc. as well as the scope of the distribution method (e.g., information posted to social media, fliers in grocery stores and community centers, etc.) will be used for future planning efforts.

Summary of Outreach Activities					
Event Date	Name of Event/Activity	Date Publicized and Communication Method (Public Notice, Posters, Social Media, etc.)	Outreach Method (Meeting, Focus Group, Survey, etc.).	Staff Members Responsible	Notes
Monthly	Hometown Today	3 <sup>rd</sup> Tuesday of month-live radio show	Radio	Varies	
Quarterly	ADRC Connections	Quarterly – Written	Mailing		
Monthly	Volunteer Opportunities	Monthly – Written Ads	Flyer	Rachel Ottery	
10/24/23	2024-2028 Coordinated Transit-Human Services Transportation Plan Public Input	October 6, 2023 Social Media, Newspaper	In Person Meeting	Jackie DeLaRosa	
10/28/23	Pumpkin Palooza	October 20, 2023 Social Media	Information Booth	Brittany Borchardt and Jennie Farmer	
12/5/23	Caregiver Holiday Event	November 6, 2023 Social Media, Flyers Mailed	In Person	Kaelan Pieper and Rob Griesel	
5/1/24	Watertown Senior Care Fair	January 31, 2024 Social Media, Flyers	In Person Booth	Rob Grisell and Karlee Holland	
5/14/24	Aging Survey	May 14, 2024 – Media, Website	Survey	Brittany Borchardt	
6/7/24	Brat Fry	May 17, 2024 Radio Advertising, Social Media	Hosted Event/Booth	Brittany Borchardt	
7/9/24	SFMV Distribution	May 30, 2024 Mailings, Social Media	In Person Booth	Rachel Ottery	
7/18/24	SFMV Distribution	May 30, 2024 Mailings, Social Media	In Person Booth	Rachel Ottery	

## Summary of Outreach Activities

Event Date	Name of Event/Activity	Date Publicized and Communication Method (Public Notice, Posters, Social Media, etc.)	Outreach Method (Meeting, Focus Group, Survey, etc.).	Staff Members Responsible	Notes
7/29/24	SFMV Distribution	May 30, 2024 Mailings, Social Media	In Person Booth	Rachel Ottery	
8/6/24	SFMV Distribution	May 30, 2024 Mailings, Social Media	In Person Booth	Rachel Ottery	
8/14 – 8/18/24	Dodge County Fair	August 1, 2024 Newsletter	In Person Booth	ADRC Staff	
10/9 – 10/10/24	25-27 Aging Plan Goals Public Input	October 3, 2024 Social Media, Flyers	In Person Presentation	Brittany Borchardt	

### Limited English Proficiency (LEP) Plan

#### Overview

As a recipient of federal financial assistance, Dodge County Human Services and Health Department is required to prepare a Limited English Proficiency (LEP) Plan to address its responsibilities relating to the needs of individuals with limited English language skills.

This plan has been prepared in accordance with [Title VI of the Civil Rights Act of 1964, 42 U.S.C 2000d, et seq.](#), and its implementing regulations which state that no person shall be subjected to discrimination on the basis of race, color, or national origin.

[Executive Order 13166 “Improving Access to Services for Persons with Limited English Proficiency”](#), issued in 2000 clarified Title VI of the Civil Rights Act of 1964. It stated that individuals who do not speak English well and who have a limited ability to read, write, speak, or understand English are entitled to language assistance under Title VI in order to access public services or benefits for which they are eligible. While most individuals in Wisconsin read, write, speak, and understand English, for some individuals English is not their primary language. If these individuals have a limited ability to read, write, speak, or understand English, they are considered Limited English Proficient (LEP).

The US DOT [“Policy Guidance Concerning Recipients’ Responsibilities to LEP Persons”](#) discusses the concept of “safe harbor” with respect to the requirements for translation of written materials. The *Safe Harbor Threshold* is calculated by dividing the population estimate for a language group that “Speaks English less than very well” by the total population of the county. The *LEP Safe Harbor Threshold* provision stipulates that for each LEP group that meets the LEP language threshold (5% or 1,000 individuals, whichever is less, of the population to be served) the Dodge County Human Services and Health Department must provide translation of vital documents (e.g., Notice of Nondiscrimination, Complaint Procedure and Complaint Form) in written format for non-English speaking persons.

Recipients of federal financial assistance are also required to implement LEP plans in accordance with guidelines of the federal agency from which the funds are provided. [FTA Circular 4702.1B – Title VI Requirements and Guidance for FTA Recipients](#) provides guidance and instructions for LEP Plan development.

#### Plan Summary

Dodge County Human Services and Health Department has developed this *Limited English Proficiency Plan* to identify reasonable steps for providing language assistance to persons with limited English proficiency (LEP) who wish to access services provided by Dodge County Human Services and Health Department.

This plan outlines how to identify a person who may need language assistance, how to inform LEP persons language assistance is available, the ways in which assistance may be provided, and staff training.

## **Plan Components**

As a recipient of federal US DOT funding, Dodge County Human Services and Health Department is required to take reasonable steps to ensure meaningful access to programs and activities by LEP persons.

This plan includes the following elements:

1. The results of the *Four Factor Analysis*, including a description of the LEP population(s), served.
  - ✓ **Demography** of LEP persons who may be served or are likely to encounter an LAPC program or service.
  - ✓ **Frequency** of contact with LEP persons
  - ✓ **Importance** of program to LEP persons
  - ✓ **Resources and costs** to provide LEP assistance
2. A description of the following:
  - ✓ How language assistance services are provided.
  - ✓ How LEP persons are informed of the availability of language assistance services.
  - ✓ How the language assistance plan is monitored and updated.
  - ✓ How employees are trained to provide language assistance to LEP persons.

### **Meaningful Access - Four Factor Analysis**

To prepare this plan, Dodge County Human Services and Health Department conducted a four-factor analysis which considers the following:

#### **Factor 1 - Demography**

**Number and proportion of LEP persons who may be served or are likely to encounter a Dodge County Human Services and Health Department program or service.**

This plan uses [US Census Bureau – American Fact Finder \(2011-2015\)](#) language data available at the county level in Wisconsin. More data is available on the [US Census Bureau ACS website](#).



Dodge  
County LE...

The US Census Bureau – American Fact Finder (2011-2015) data shows there are numerous languages spoken in Dodge County. Some of these languages include Spanish, German, Russian, Polish, Chinese, Hmong, Arabic, and Tagalog. After English, the second largest language group is Spanish.

The Safe Harbor Threshold is calculated by dividing the population estimate for a language group that “speaks English less than very well” by the total population of the county. The LEP Safe Harbor Threshold provision stipulates that for each LEP group that meets the LEP language threshold (5% or 1,000 individuals, whichever is less), Dodge County Human Services and Health Department must provide translation of vital documents in written format for non-English speaking persons.



US Census data shows that in Dodge County, with a population estimate of 84,033, 830 persons have identified themselves as Spanish speaking and “speaks English less than very well”.

The Spanish language group is less than 1% and below the 5%, or 1,000 persons threshold of the population to be served. This means Dodge County Human Services and Health Department is not required to provide written translation of vital documents. Even though the 830 persons Spanish language group is below the 1,000 per threshold, Dodge County Human Services and Health Department has its vital documents (Notice of Nondiscrimination, Complaint Procedure, and Complaint Form) translated in Spanish.

All other language groups listed above are also below the Safe Harbor Threshold. This means, at this time, Dodge County Human Services and Health Department is not required to provide written translation of vital documents in these languages.

In the future, if Dodge County Human Services and Health Department meets the Safe Harbor Threshold for any language group, it will provide written translation of vital documents in such languages and consider measures needed for oral interpretation.

## **Factor 2 – Frequency**

### **Frequency of contact with LEP persons.**

Dodge County Human Services and Health Department and its volunteers provide transportation service for Dodge County Human Services and Health Department and in Dodge County.

Dodge County Human Services and Health Department reviewed the frequency with which its staff, policy board, lessees and volunteers have or could have contact with LEP persons in the conduct of Dodge County Human Services and Health Department activities. This includes a review of documented phone inquiries, office visits, and encounters at public meetings and community events. Within the last year, Dodge County Human Services and Health Department staff, policy board, lessees and volunteers had 15 requests for interpreters and 4 requests for translated program documents in any setting.

Dodge County Human Services and Health Department staff, policy board, lessees, and volunteers are trained on what to do when they encounter a person with limited English proficiency.

Dodge County Human Services and Health Department staff tracks the number of encounters and considers adjustments to its outreach efforts to ensure meaningful access to all persons and specifically to LEP and minority populations of Dodge County Human Services and Health Department’s programs and services. The *Log of LEP Encounters* is a tool to help track LEP encounters (Appendix 7).

### **Log of LEP Encounters**

Date	Time	Language Spoken By Individual (if available)	Name and Phone Number of Individual (if available)	Service Requested	Follow Up Required	Staff Member Providing Assistance	Notes
03/22/2024	1:00PM	SPANISH	N/A	EBS	NO	JF	
06/03/2024	9:00AM	SPANISH	N/A	DBS	NO	AS	
07/15/2024	9:00AM	SPANISH	N/A	EBS	YES	AH	
8/20/2024	11:30AM	SPANISH	N/A	TRANSITION	YES	BB	
8/28/2024		ASL	N/A	OPTIONS	NO	JE	

Date	Time	Language Spoken By Individual (if available)	Name and Phone Number of Individual (if available)	Service Requested	Follow Up Required	Staff Member Providing Assistance	Notes
8/29/2024	9:00AM	SPANISH	N/A	EBS	YES	AH	
9/3/2024		SPANISH	N/A	EBS	YES	AH	
9/24/2024		SPANISH	N/A	EBS	YES	AH	
9/26/2024		SPANISH	N/A	EBS	YES	AH	
9/27/2024	11:30AM	SPANISH	N/A	TRANSITION	NO	BB	
9/30/2024		SPANISH	N/A	EBS	YES	AH	
10/2/2024		SPANISH	N/A	EBS	YES	AH	
10/8/2024		SPANISH	N/A	EBS	YES	AH	
10/21/2024		SPANISH	N/A	EBS	YES	AH	
10/22/2024		SPANISH	N/A	EBS	YES	AH	

If a language barrier were to exist, Dodge County Human Services and Health Department works to provide a reasonable accommodation. The *"I Speak" Language Identification Card* listed shown below is a document that can be used by Dodge County Human Services and Health Department staff to assist LEP individuals. Additional languages can be added, as needed, to match the demographic changes of Dodge County Human Services and Health Department's service area. The languages included in the *"I Speak" Language Identification Card* below represent languages spoken within Dodge County Human Services and Health Department service area.

### ***"I Speak" Language Identification Card***

Mark this box if you speak....	Language Identification Chart	Language
	I speak English	English
	Yo hablo español	Spanish
	Kug has lug Moob	Hmong
	我說中文	Chinese Simplified
	E nói tiếng Việt	Vietnamese
	나는한국어를	Korean
	Marunong akong mag-Tagalog	Tagalog
	Ich spreche Deutsch	German
	Я говорю по-русски	Russian
	Ja говорим српски	Serbian
	मैं हिंदी बोलते हैं	Hindi
	میں نے اردو بولتے ہیں	Urdu

Note: For additional languages visit the LEP.gov website  
<https://www.lep.gov/sites/lep/files/media/document/2022-06/i-speak-booklet.pdf>

### **Factor 3 – Importance**

#### **Nature and importance of program to LEPs.**

It is imperative that language assistance be provided to ensure LEP individuals have access to essential services, and transportation plays a key role in connecting LEP persons to these services. Public transportation fare/service changes and eligibility requirements should be communicated to LEP individuals so they can access the essential programs and services. It is also important that LEP individuals understand their full rights and benefits when accessing transportation program and services to ensure they have been treated fairly and can identify and report discrimination if they are not.

Dodge County Human Services and Health Department assessment of critical needs includes contact with community organization(s) that serve LEP persons, as well as contact with LEP persons themselves to obtain information on the importance of the modes or the types of services that are provided to the LEP populations.

With improving outreach activities, Dodge County Human Services and Health Department is working to increase contact with LEP individuals at public involvement meetings and activities.

### **Factor 4 – Resources and Costs**

#### **Resources available and overall cost to provide LEP assistance.**

Given the small size of LEP encounters and small LEP populations, full multi-language translations of our programs and services related to transportation services is not warranted at this time. However, this information can be made upon request. Dodge County Human Services and Health Department will contact state and local units of government and community resources for assistance in translation services.

Even though Dodge County Human Services and Health Department does not have a separate budget for LEP outreach, it continuously explores ways to implement methods of notifying LEP persons of transportation services. Outreach efforts include maintaining a website, utilizing social media, developing, and printing brochure/materials, and having a visible presence in our community (e.g., participating in job fairs, parades, community events, etc.) to promote transportation services. Additional outreach methods to reach LEP communities include but are not limited to activities such as visiting ethnic stores/markets and restaurants, community centers, libraries, faith-based institutions, and local festivals. The cost is relatively low but the ability to reach the LEP population is high.

## **Language Assistance Services**

### **Overview - Language Assistance Services**

If a person does not speak English as their primary language and is LEP, that person is entitled to language assistance with respect to accessing Dodge County Human Services and Health Department's programs and services. Language assistance can include interpretation and/or translation from one language into another language.

Dodge County Human Services and Health Department will take reasonable steps to provide the opportunity for meaningful access to LEP individuals who have difficulty communicating in English.

Dodge County Human Services and Health Department strives to offer the following measures when encountering LEP persons:



- ✓ Post Title VI, LEP, and ADA information on Dodge County Human Services and Health Department website and civil rights posters posted on each reception area.
- ✓ Bi-lingual staff on site.
- ✓ Contracted with interpreting agencies:
  - PIE – Professional Interpreting Enterprise (608) 286-1252
  - SWITS – Southern Wisconsin Interpreting & Translation Services, Ltd. (262) 740-2590
- ✓ Day to day operations:
  - Utilize the “*I Speak*” *Language Identification Card* or posters to identify the language and communication need of LEP persons.
  - Maintain a *Log of LEP Encounters* to capture information on the frequency of contact with LEP individuals to determine whether additional language assistance services are needed.
- ✓ Utilize Wisconsin Relay 7-1-1, the state of Wisconsin resource to assist with communication needs for individuals that are deaf, hard of hearing, deafblind, or those with a speech disability <http://www.wisconsinrelay.com/> and <http://www.wisconsinrelay.com/features>
- ✓ Utilize online resources such as Google Translate to assist with translation requests. The main downside of this approach is accuracy. As such, this option will be used by Dodge County Human Services and Health Department on limited basis. Instead, Dodge County Human Services and Health Department will seek assistance from fluent speakers.

#### **Public Outreach – Informing LEP Persons of Language Assistance Services**

Dodge County Human Services and Health Department uses the following steps to inform LEP persons of the availability of language assistance services:

- ✓ Posts the Title VI/ADA *Notice of Nondiscrimination* on its website. The notice includes a sentence written in Spanish and Hmong providing instructions on how to contact Dodge County Human Services and Health Department to request information in another language.
- ✓ When encountering LEP persons directly, Dodge County Human Services and Health Department staff will use the “*I Speak*” *Language Identification Card* to identify the language and communication needs of LEP persons.
- ✓ Review outreach activities and information gathered from the *Log of LEP Encounters* on the frequency of contact with LEP individuals to determine whether additional language assistance services are needed.
- ✓ Utilize translation services such as:
  - PIE – Professional Interpreting Enterprise (608) 286-1252
  - SWITS – Southern Wisconsin Interpreting & Translation Services, Ltd. (262) 740-2590
- ✓ Utilize Wisconsin Relay 7-1-1, the state of Wisconsin resource to assist with communication needs for individuals that are deaf, hard of hearing, deafblind, or those with a speech disability <http://www.wisconsinrelay.com/> and <http://www.wisconsinrelay.com/features>

#### **Monitoring, Evaluating and Updating the Plan**

Dodge County Human Services and Health Department will review the LEP Plan on an annual basis and examine the following:

- ✓ The number of documented LEP person contacts.
- ✓ How the needs of LEP persons have been addressed.

- ✓ Determine whether the need for translation services has changed.
- ✓ Determine which existing language assistance services are effective and sufficient to meet the needs of LEP persons.
- ✓ Determine whether complaints have been received concerning Dodge County Human Services and Health Department's failure to meet the needs of LEP individuals.
- ✓ Sufficiency of staff training.
- ✓ Review of any new opportunities for LEP communication.
- ✓ Determine whether financial resources are needed to fund language assistance services.

### **Training Staff**

The following training will be provided to Dodge County Human Services and Health Department staff:

- ✓ Information on the **Dodge County Human Services and Health Department's** Title VI/ADA Non-Discrimination Plan and LEP responsibilities.
- ✓ Description of language assistance services offered to the public.
- ✓ Use of the "I-Speak Card" as a tool to assist LEP individuals.
- ✓ Documentation of language assistance requests using the *Log of LEP Encounters*.
- ✓ How to handle Title VI/ADA Non-Discrimination and LEP complaints.



## Limited English Proficient (LEP) Tools

### "I Speak" Language Identification Card

"I Speak" Language Identification Card

Mark this Box if you speak...	Language Identification Chart	Language
	I speak English	English
	Yo hablo español	Spanish
	Kug has lug Moob	Hmong
	我說中文	Chinese Simplified
	E nói tiếng Việt	Vietnamese
	나는한국어를	Korean
	Marunong akong mag-Tagalog	Tagalog
	Ich spreche Deutsch	German
	Я говорю по-русски	Russian
	o magsalita ng Tagalog	Tagalog
	मैं हिंदी बोलते हैं	Hindi
	میں نے اردو بولتے ہیں	Urdu

**Note:** For additional languages visit the US Census Bureau website  
<https://www.lep.gov/ISpeakCards2004.pdf>

### Log of LEP Encounters

Date	Time	Language Spoken By Individual (if available)	Name and Phone Number of Individual (if available)	Service Requested	Follow Up Required	Staff Member Providing Assistance	Notes

## Language Translation Request Log

Date	Language Spoken By Individual <i>(if available)</i>	Name and Phone Number of Individual <i>(if available)</i>	Service Requested	Follow Up Actions (Was Translation Services Provided?)	Staff Member Providing Assistance	Notes
03/22/2024	SPANISH	N/A	EBS	YES	JF	
06/03/2022	SPANISH	N/A	DBS	YES	AS	
07/15/2024	SPANISH	N/A	EBS	YES	AH	
08/20/2024	SPANISH	N/A	TRANSITION	YES	BB	

## Demographic Representation Information

### A. Demographic Representation Table<sup>4</sup>

FTA Title VI Circular 4702.1B requires recipients which have transportation-related, non-elected boards, advisory council or committees, or similar bodies, to report membership of these committees broken down by race and include a description of efforts made to encourage the participation of minorities on these committees. The table below depicts US Census county population data by race in Dodge County and the membership of Dodge County Human Services and Health Department's transportation related non-elected committees/councils/boards.



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Body	Caucasian	Hispanic/ Latino	Black/ African American	Asian American	Native American	Some Other Race	No Response
Dodge County Population	89.6%	5.01%	2.7%	.67%	.07%	1.77%	---
Transportation Advisory Committee	100%	0%	0%	0%	0%	0%	---
Human Services and Health Department Board	100%	0%	0%	0%	0%	0%	---
Commission on Aging and Disability Services	100%	0%	0%	0%	0%	0%	---

### B. Efforts to Encourage Minority Participation

**Dodge County Human Services and Health Department** understands diverse representation on committees, councils and boards results in sound policy reflective of its entire population. As such, **Dodge County Human Services and Health Department** encourages participation of all its citizens. As vacancies on non-elected committees, councils, and boards become available, **Dodge County Human Services and Health Department** will make efforts to encourage and promote diversity.

To encourage participation on its committees, councils, and boards **Dodge County Human Services and Health Department** will continue to reach out to community organizations to connect with all population groups in its service area. In addition, **Dodge County Human Services and Health Department** will use creative ways to make participating realistic and reasonable, such as scheduling meetings at times best suited to its members.

<sup>4</sup> County data by race is available at the WisDOT website <https://wisconsindot.gov/Documents/doing-bus/local-gov/astnce-pgms/transit/compliance/title6-race.pdf> or the US Census Bureau website <http://data.census.gov>

## Demographic Representation Data Collection Form<sup>5</sup>

Name of board, commission, council, etc.

Date:

NA - This is an optional tool to gather information on the racial composition of Board members.

Dear Member,

**Dodge County Human Services and Health Department**, as a recipient of federal funds is required under Title VI of the Civil Rights statute to ascertain the racial/ethnic make-up of any non-elected boards, commissions, councils, etc.

Data from this section is used for statistical and reporting purposes. The information may be subject to disclosure under federal or state law or rule.

### Anti-Discrimination Notice

It is unlawful for **Dodge County Human Services and Health Department** to fail or refuse to provide services, access to services or activities, or otherwise discriminate against an individual because of an individual's race, color, religion, sex, national origin, disability, or veteran status.

As a council under the jurisdiction of **Dodge County Human Services and Health Department**, we invite council members to voluntarily self-identify their race/ethnicity for us to comply with FTA Title VI and LEP requirements. This information will be used according to the provisions of applicable federal and state laws, executive orders and regulations, including those requiring the information to be summarized and reported to the federal government for civil rights enforcement purposes.

### Race/Ethnicity

If you choose to self-identify, please mark the **one box** describing the race/ethnicity category with which you primarily identify:

\_\_\_ *Asian or Pacific Islander*: All persons having origins in any of the peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

\_\_\_ *Black and/or African American* (not of Hispanic origin): All persons having origins in any of the Black racial groups of Africa.

\_\_\_ *Hispanic*: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

\_\_\_ *American Indian or Alaskan Native*: All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

\_\_\_ *Caucasian* (not of Hispanic origin): All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

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<sup>5</sup> This form is an optional tool **Dodge County Human Services and Health Department** can use to gather information on the racial composition of its committee members for the purposes of meeting the Title VI/ADA plan requirements.

# Vital Documents for Spanish Speakers

## Aviso de No Discriminación

### Dodge County Human Services and Health Department

- ✓ El **Dodge County Human Services and Health Department** esta comprometido a garantizar que ninguna persona sea excluida de participar, se le nieguen los beneficios o de cualquier otra forma sea sujeta a discriminación en las bases de raza, color, nacionalidad de origen, discapacidad, sexo, edad, religión, estado de ingresos o Dominio Limitado del Inglés (LEP por sus siglas en inglés) en todos y cada uno de los programas, actividades o servicios administrados por **Dodge County Human Services and Health Department** de acuerdo con el Título VI de la Ley de Derechos Civiles de 1964 y las autoridades no discriminatorias relacionadas. **Dodge County Human Services and Health Department** asegura además que se harán todos los esfuerzos posibles para garantizar la no discriminación en todas las actividades de su programa financiado con fondos federales.
- ✓ Cualquier persona que crea que ha sido agraviada por cualquier práctica discriminatoria ilegal puede presentar una queja con **Dodge County Human Services and Health Department**.
- ✓ Para obtener más información acerca del programa de derechos civiles de **Dodge County Human Services and Health Department**, y los procedimientos para presentar una queja, comuníquese (920)386-3500, toll free at 1-800-924-6407, fax at (920) 386-4015 (para las personas con problemas de audición, por favor utilice [Wisconsin Relay 711](#)), correo electrónico [hsagingunit@co.dodge.wi.us](mailto:hsagingunit@co.dodge.wi.us) o visite nuestra oficina en 199 County Road DF, Juneau, WI 53039. Para obtener más información, visite <https://www.co.dodge.wi.gov/departments/departments-a-d/aging-and-disability-resource-center/transportation>
- ✓ También se puede presentar una queja directamente ante cualquiera de los siguientes:
  - Departamento de Transporte de Wisconsin (WisDOT por sus siglas en inglés), Taqwanya Smith, Coordinadora Superior de Título VI y ADA, teléfono: (608) 266-8129, TTY (800) 947- 3529, Fax: (608)267-3641, Correo electrónico: [taqwanya.smith@dot.wi.gov](mailto:taqwanya.smith@dot.wi.gov), 4822 Madison Yards Way, 5<sup>th</sup> Floor South, Madison, WI 535705. Para obtener más información, visite la [página web del WisDOT Título VI-ADA](#).
  - Departamento de Transporte de los Estados Unidos, Administración Federal de Tránsito (FTA por sus siglas en inglés), Oficina de Derechos Civiles, 1200 New Jersey Avenue SE, Washington, DC 20590, Teléfono: 1-888-446-4511 o 711 (Relay), correo electrónico: [FTACivilRightsCommunications@dot.gov](mailto:FTACivilRightsCommunications@dot.gov)
  - Si se necesita información en otro idioma de contacto, (920)386-3500 or 1-800-924-6407.



## El Procedimiento de Quejas

El Procedimiento de Quejas de la Dodge County Human Services and Health Department está disponible en los siguientes lugares:

- ✓ Sitio web de la agencia, ya sea como referencia en el aviso al público o en su totalidad.
  - ✓ Áreas públicas de la oficina de la agencia (área común, salas de reuniones públicas, etc.)
  - ✓ Disponible en idiomas apropiadas para poblaciones LEP, cumpliendo con el umbral de puerto seguro.
- 

Cualquier persona que crea haber sido discriminado por motivos de raza, color, origen nacional, discapacidad, sexo, edad, religión, estado de ingresos o dominio limitado del inglés (LEP) por parte de la Dodge County Human Services and Health Department puede completar un formulario de queja y entregar el a de la Dodge County Human Services and Health Department.

El formulario de queja también se puede usar para entregar quejas generales a la Dodge County Human Services and Health Department.

De la Dodge County Human Services and Health Department investiga las quejas recibidas no más de 180 días hábiles después del presunto incidente. De la Dodge County Human Services and Health Department procesará las quejas que estén completas.

Una vez que se recibe la queja, la Dodge County Human Services and Health Department la revisará y trabajará para resolverla de manera informal, si es posible.

Si la queja garantiza un proceso formal de queja de derechos civiles, la Dodge County Human Services and Health Department seguirá los pasos enumerados en este procedimiento de queja. La Dodge County Human Services and Health Department también puede utilizar este procedimiento formal para atender quejas generales. Si la Dodge County Human Services and Health Department determina que tiene jurisdicción, el demandante recibirá una carta de reconocimiento que indica que la queja será investigada por la Dodge County Human Services and Health Department como una queja de derechos civiles.

La Dodge County Human Services and Health Department tiene 30 días hábiles para investigar la queja de derechos civiles. Si se necesita más información para resolver el caso, la Dodge County Human Services and Health Department puede contactar al demandante.

El/La demandante tiene **14** días hábiles a partir de la fecha de la carta para enviar la información solicitada al investigador asignado al caso.

Si el demandante no contacta al investigador o no envía la información adicional dentro de los **14** días hábiles, la Dodge County Human Services and Health Department puede cerrar el caso administrativamente. Un caso puede cerrarse administrativamente también si el demandante ya no desea continuar con su caso.

Después de que el investigador revise la queja, se emitirá una de dos (2) cartas al demandante: una carta de cierre o una carta de descubrimiento.

- ✓ Una carta de conclusión resume las acusaciones y establece que no hubo una violación del Título VI y que el caso se cerrará.
- ✓ Una carta de descubrimiento resume las acusaciones y las entrevistas con respecto al presunto incidente, y explica si ocurrirá alguna acción disciplinaria, capacitación adicional del miembro del personal u otra acción.

Si el demandante desea apelar la decisión, tiene 14 días hábiles después de la fecha de la carta o la carta de descubrimiento para hacerlo.

Una persona también puede entregar una queja directamente ante la Administración Federal de Tránsito, en la Oficina de Derechos Civiles de la FTA, 1200 New Jersey Avenue SE, Washington, DC 20590.

Si se necesita información en otro idioma de contacto, (920) 386-3500 or 1-800-924-6407.

# Dodge County Human Services and Health Department

## – Formulario de Complemento/Queja

Queremos sus comentarios. Si desea enviar una queja o comentario, complete este formulario y envíelo por correo electrónico a [hsaging@co.dodge.wi.us](mailto:hsaging@co.dodge.wi.us) o en persona a la dirección que aparece a continuación.

Por favor, entregar este formulario electrónicamente o en persona a la dirección debajo.

**Dodge County Human Services and Health Department**  
199 County Road DF  
Juneau, WI 53039

También, puede nos llamar a 920-386-3500. Por favor, provea su información de contacto para recibir una respuesta.

### Sección A: Requisitos de formato accesible

Por favor marque el formato preferido para este documento.

<input type="checkbox"/> Letra grande	<input checked="" type="checkbox"/> TDD o Retransmisión	<input type="checkbox"/> Grabación de audio	<input type="checkbox"/> Otra (si lo selecciona, indique qué tipo de formato necesita en la casilla a continuación)
---------------------------------------	---	---	---

Haga clic o toque aquí para ingresar el texto

### Sección B: Información de contacto

<b>Nombre</b> Haga clic o toque aquí para ingresar el texto	<b>Número de teléfono (incluyendo el Código de área)</b> Haga clic o toque aquí para ingresar el texto
<b>Dirección</b> Haga clic o toque aquí para ingresar el texto	<b>Ciudad</b> Haga clic o toque aquí para ingresar el texto
<b>Estado</b> Haga clic o toque aquí para ingresar el texto	<b>Código postal</b> Haga clic o toque aquí para ingresar el texto

**Correo electrónico** Haga clic o toque aquí para ingresar el texto

¿Está usted presentando esta queja en su propio nombre?	<input type="checkbox"/> Sí	<input type="checkbox"/> No
---	-----------------------------	-----------------------------

Si la respuesta es No, por favor proporcione el nombre y la relación de la persona por quien está presentando la queja y por qué está usted completando el formulario en su nombre en la casilla a continuación.

Haga clic o toque aquí para ingresar el texto

Por favor, confirme que usted ha obtenido el permiso de la parte agraviada si usted está presentando en nombre de un tercero.	<input type="checkbox"/> Sí	<input type="checkbox"/> No
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### Sección C: Tipo de comentario

¿Qué tipo de comentario estás usted proveyendo? Por favor, marque qué la categoría que mejor corresponde.

<input type="checkbox"/> Queja	<input type="checkbox"/> Sugerencia	<input type="checkbox"/> Cumplido	<input type="checkbox"/> Otra
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¿Cual de las siguiente describe la naturaleza del comentario? Por favor, marque uno o más de las casillas de verificación.

<input type="checkbox"/> Raza	<input type="checkbox"/> Color	<input type="checkbox"/> Nacionalidad de Origen	<input type="checkbox"/> Religión
<input type="checkbox"/> Edad	<input type="checkbox"/> Sexo	<input type="checkbox"/> Servicio	<input type="checkbox"/> Estado de Ingresos
<input type="checkbox"/> Ley de Estadounidenses con Discapacidades (A.D.A. por sus siglas en inglés)		<input checked="" type="checkbox"/> Ley de Estadounidenses con Discapacidades (A.D.A. por sus siglas en inglés)	

### Sección D: Detalles de comentario

Por favor, responda las siguientes preguntas con respecto a su comentario.

¿El incidente ocurrió en el siguiente tipo de servicio? Por favor marque cualquier casilla que corresponda.	<input type="checkbox"/> Paratrásito	<input checked="" type="checkbox"/> Viajes Compartidos en Taxi	<input type="checkbox"/> Autobús
¿Cuál fue la fecha de la ocurrencia?	Haga clic para agregar la fecha en el siguiente formato: Día, mes, año		
¿Cuál fue la hora de la ocurrencia?	Haga clic para agregar la hora		
¿Cuál es el nombre o identificación del empleado o empleados involucrados?	Haga clic o toque aquí para ingresar el texto		
¿Cuál es el nombre o identificación de otros involucrados, si corresponde?	Haga clic o toque aquí para ingresar el texto		
¿Cuál es el numero o nombre de la ruta en la que usted viajaba, si corresponde?	Haga clic o toque aquí para ingresar el texto		
¿Cuál era la dirección o destino al que usted se dirigía cuando ocurrió el incidente, si corresponde?	Haga clic o toque aquí para ingresar el texto		
¿Donde fue el lugar de la ocurrencia?	Haga clic o toque aquí para ingresar el texto		
¿Estuvo involucrado el uso de una ayuda de movilidad en el incidente?	<input type="checkbox"/> Sí	<input type="checkbox"/> No	

Por favor, agregue cualquier detalle descriptivo adicional acerca del incidente.	Haga clic o toque aquí para ingresar el texto
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**En la casilla a continuación, por favor explique tan claro como le sea posible lo que sucedió y por qué cree que fue discriminado.**

Haga clic o toque aquí para ingresar el texto

### Sección E: El seguimiento

¿Podemos comunicarnos con usted si necesitamos más detalles o información?	<input type="checkbox"/> Sí	<input type="checkbox"/> No
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**Si la respuesta es Sí, ¿Cómo le gustaría que nos comunicáramos con usted? Por favor seleccione su forma de comunicación preferida a continuación**

<input type="checkbox"/> Teléfono	<input type="checkbox"/> Correo electrónico	<input type="checkbox"/> Correo Postal
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**Si prefiere que nos comuniquemos por teléfono, indique el mejor día y hora para comunicarnos con usted.**

Haga clic para agregar su horario preferido	Haga clic aquí para agregar su día preferido
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**Si corresponde, por favor enumere a continuación todas las agencias adicionales ante las cuales usted ha presentado esta queja, tales como agencias federales, estatales, locales o ante cualquier tribunal Federal o Estatal. Por favor incluya la información de contacto del lugar al cual se envió la queja.**

Haga clic o toque aquí para introducir el texto

### Sección F: Resultado deseado

**Por favor, enumere a continuación qué pasos le gustaría seguir para abordar el conflicto o problema.**

Haga clic o toque aquí para ingresar el texto

### Sección G: Firma

**Por favor, adjunte algunos documentos que tenga que apoya la denuncia. Luego, feche y firme este formulario y envíelo a La Dodge County Human Services and Health Department.**

Nombre Haga clic o toque aquí para ingresar el texto	Fecha: Haga clic para agregar la fecha en el siguiente formato: Día, mes, año
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Firma Haga clic o toque aquí para introducir el texto



