

**Federal Transit Administration
Non-Discrimination Program
Lafayette Council on Aging, Inc.**

July 18, 2023

(Non-Discrimination Plan expires 3 years from date approved by the board)

Non-Discrimination Plan Table of Contents

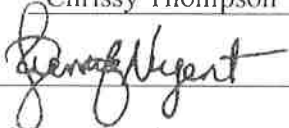
The Lafayette Council on Aging Non-Discrimination plan includes the following elements:

1. Plan Approval and Revision Log
2. Policy Statement
3. Notice to the Public
4. Complaint Procedure
5. Complaint Form
6. List of transit related Non-Discrimination Investigations, Complaints and Lawsuits
7. Public Participation Plan
8. Language Assistance Plan
9. Minority Representation Table and Description
10. Providing Assistance to and Monitoring Subrecipients
11. Title VI Equity Analysis
12. MPO Requirements – This is only required if the MPO operates the service

Section 1: Non-Discrimination Plan Approval

Non-Discrimination Plan Adopted on: July 18, 2023

Adopted by: Jennifer Nugent, President
Ray Bias, Vice President
Emilie Duhon, Secretary
Michael Hebert, Treasurer
Susan Amos, Tiffany Augustine, Karon Davis, Raquel McCorvey,
Chrissy Thompson

Signature(s): 

Print Name of signature above Jennifer Nugent

Print Title of signature above Board President

Date SIGNED: July 18, 2023

Include documentation to show approval (i.e., minutes, resolutions, ordinance, etc.) The person given the authority to sign should be the person who actually signs the document.

Non-Discrimination Plan Revision Log

Date Month/day/year	Section Revised	Summary of Revisions
n/a	n/a	n/a

Section 2: Non-Discrimination Policy Statement

Policy Statement

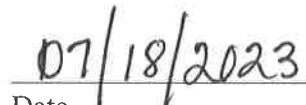
The **Lafayette Council on Aging** assures that no person shall on the grounds of race, color, or national origin as provided by Title VI of the Civil Rights Act of 1964, and the Civil Rights Restoration Act of 1987 (P.L. 100.259) be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any programs or activities. **Lafayette Council on Aging** assures every effort will be made to ensure nondiscrimination in all of its programs and activities, whether those programs and activities are federally funded or not (inclusive of additional Title VI Authorities and citations).

The Civil Rights Restoration Act of 1987, broadened the scope of Title VI coverage by expanding the definition of terms "programs or activities" to include all programs or activities of Federal Aid recipients, sub-recipients, and contractor/consultants, whether such programs and activities are federally assisted or not (Public Law 100259 [S.557] March 22, 1988.)

Lafayette Council on Aging will be responsible for initiating and monitoring Title VI activities, preparing required reports and other responsibilities as required by 23 Code of Federal Regulation, (CFR) 200 and 49 Code of Federal Regulation 21.



LaKisha L. Varner
Agency Director Name


Date

Any individual, group of individuals or entity that believes they have been discriminated against on the basis of race, color or national origin by the **Lafayette Council on Aging** may file a Non-Discrimination complaint by submitting the agency's Non-Discrimination Complaint Form.

For all Discrimination matters, please contact:
LaKisha L. Varner, Executive Director
160 Industrial Parkway
Lafayette, LA 70508
337-262-5990
coadirector@lafcoa.org

Section 3: Notice to the Public

Non-Discrimination Notice to the Public

The Lafayette Council on Aging's Notice to the Public is as follows:

Notifying the Public of Rights Non-Discrimination

Lafayette Council on Aging, Inc.

- ✓ The Lafayette Council on Aging operates its programs and services without regard to race, color, and national origin in accordance with Title VI of the Civil Rights Act. Any person who believes she or he has been aggrieved by any unlawful discriminatory practice may file a complaint with the Lafayette Council on Aging and should be filed within 180 days of date of alleged discrimination.
- ✓ For more information on the Lafayette Council on Aging's civil rights program, the procedures to file a complaint or to file a complaint contact 337-262-5990, (TTY 800-262-5990); email coadirector@lafcoa.org; or visit our administrative office at 160 Industrial Parkway, Lafayette, LA 70508. For more information, visit www.laf-coa.org.
- ✓ A complaint may also be filed directly with the:

Louisiana Department of Transportation and Development, Attn: Cynthia Douglas, 1201 Capitol Access Road, Baton Rouge, LA 70804 or (225) 379-1923.

Federal Transit Administration, Office of Civil Rights, Attention: Title VI Program Coordinator, East Building, 5th Floor-TCR, 1200 New Jersey Ave., SE Washington, DC, 20590.
- ✓ If information is needed in another language, contact 337-262-5990.
- ✓ The Lafayette Council on Aging adheres to requirements of the Americans with Disabilities Act (ADA) and makes every reasonable modification to its policies, practices and services to ensure accessibility for riders and will make reasonable modifications and/or accommodations upon request of a rider with a disability.
- ✓ For more information on reasonable accommodation please contact the Lafayette Council on Aging civil rights program, the procedures to file a complaint or to file a complaint contact 337-262-5990, (TTY 800-262-5990); email coadirector@lafcoa.org; or visit our administrative office at 160 Industrial Parkway, Lafayette, LA 70508. For more information, visit www.laf-coa.org.

The Lafayette Council on Aging Notice to the Public is posted in the public areas of the office and inside the transit vehicles.

Notificación al público de derechos bajo el no discriminación

- El **Lafayette Council on Aging** opera sus programas y servicios sin distinción de raza, color y origen nacional, según el no discriminación. Cualquier persona que cree o que ha sido perjudicada por una práctica discriminatoria ilegal bajo el Título VI o no discriminación puede presentar una queja con el **Lafayette Council on Aging**.
- Para obtener más información sobre el programa de derechos civiles de **Lafayette Council on Aging**, o para obtener más información sobre los procedimientos para presentar una queja llame al 337-262-5990, coadirector@lafcoa.org o visite nuestra oficina administrativa en 160 Industrial Parkway, Lafayette, LA 70508.
- Un demandante puede presentar una queja directamente a la el Departmet de Transporte del estado de Louisiana, llame al (225) 379-1923. Email Cynthia.douglas@la.gov,
- Un demandante puede presentar una queja directamente a la Administración Federal de tránsito, Oficina de Derechos Civiles, Atención: Coordinadora del Programa Título VI, edificio este, 5 piso-TCR, 1200 New Jersey Ave., se Washington, DC, 20590.
- Si se necesita información en otro idioma, comuníquese con 337-262-5990.
- El **Lafayette Council on Aging** se adhiere a los requisitos de la Ley de Estadounidenses con Discapacidades (ADA, por sus siglas en inglés) y realiza todas las modificaciones razonables a sus políticas, prácticas y servicios para garantizar la accesibilidad de los pasajeros y realizará modificaciones y/o adaptaciones razonables a pedido de un pasajero con una discapacidad.
- Para obtener más información sobre adaptaciones razonables, comuníquese con el programa de derechos civiles de Nombre de la agencia, los procedimientos para presentar una queja o para presentar una queja comuníquese con 337-262-5990, (TTY 800-262-5990); correo electrónico coadirector@lafcoa.org ; o visite nuestra oficina administrativa en 160 Industrial Parkway, Lafayette, LA 70508. Para obtener más información, visite www.laf-coa.org.

Section 4: Non-Discrimination Complaint Procedure

The Lafayette Council on Aging's Non-Discrimination Complaint Procedure is made available in the following locations:

- Agency website, if available: www.laf-coa.org
- Hard copy in the central office
- Agency Title VI Plan

Any individual, group of individuals or entity that believes they have been discriminated against on the basis of race, color, national origin or disability by the Lafayette Council on Aging may file a non-discrimination complaint by completing and submitting the agency's non-discrimination Complaint Form. File initial complaint with LaKisha L. Varner at Lafayette Council on Aging.

Any individual having filed a complaint or participated in the investigation of a complaint shall not be subjected to any form of intimidation or retaliation. Individuals who have cause to think that they have been subjected to intimidation or retaliation can file a complaint of retaliation following the same procedure for filing a discrimination complaint.

A complaint must be filed with the Lafayette Council on Aging no later than 180 days after the following:

1. The date of the alleged act of discrimination; or
2. The date when the person(s) became aware of the alleged discrimination; or
3. Where there has been a continuing course of conduct, the date on which that conduct was discontinued of the latest instance of the conduct.

Once the complaint is received, the Lafayette Council on Aging will review it to determine if our office has jurisdiction. (A copy of each non-discrimination complaint received will be forwarded to the Louisiana Department of Transportation and Development within ten (10) calendar days of receipt.) The complainant will receive an acknowledgement letter informing her/him whether the complaint will be investigated by our office.

The Lafayette Council on Aging has 45 days to investigate the complaint. If more information is needed to resolve the case, the Lafayette Council on Aging may contact the complainant.

After the investigator reviews the complaint, she/he will issue one of two (2) letters 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 other discriminatory 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, she/he has 180 days after the date of the letter or the letter of finding to do so. A person may also file a complaint directly with the: Louisiana Department of Transportation, Attn: Cynthia Douglas, 1201 Capitol Access Road, Baton Rouge, LA 70804.

LADOTD will analyze the facts of the case and will issue its conclusion to the appellant within 60 days of the receipt of the appeal.

If information is needed in another language, contact 337-262-5990.

Lafayette Council on Aging, 160 Industrial Parkway, Lafayette, LA 70508
LaKisha L. Varner, Executive Director

Procedimiento de Queja sin discriminación

El Formulario de queja por discriminación del Lafayette Council on Aging

- Pagina web de la agencia
- Copia impresa localizada en la oficina central
- Título IV correspondiente a la agencia

Cualquier persona, grupo de individuos o entidad que crea haber sido objeto de discriminación por motivos de raza, color, nacionalidad o discapacidad por el nombre de la agencia puede presentar la queja llenando y enviando este formulario de queja por discriminación a la agencia correspondiente. (Este documento debe ser enviado a la dirección. Presente la queja inicial con LaKisha L. Varner en Lafayette Council on Aging.)

Cualquier individuo que haya presentado o participado en la investigación de alguna queja no debe ser sujeto a ninguna forma de intimidación o represalia. Aquel individuo que considere que haya sido sujeto a intimidación o represalias puede llenar un formulario de queja para represalias siguiendo este mismo procedimiento.

Esta queja deberá ser presentada a la Oficina de Programas de Cumplimiento del Lafayette Council on Aging en un periodo de no más de 180 días después de lo siguiente:

1. La fecha del presunto acto de discriminación
2. La fecha en la que la persona (s) se percataron del presunto acto de discriminación
3. Cuando se ha detectado que el acto de discriminación se ha convertido en una conducta repetitiva. En estos casos se incluiría la fecha del último acontecimiento.

Una vez que se reciba la queja, la oficina de Lafayette Council on Aging lo revisará para determinar si nuestra oficina tiene jurisdicción. El demandante recibirá una carta de notificación comunicando si la queja será investigada por nuestra oficina.

El/La coordinadora de la oficina de Lafayette Council on Aging tendrá 45 días para investigar la queja. Si se necesita más información para resolver el caso, el (la) Coordinador (a) podría contactar al demandante.

Después de que el (la) Coordinador revise la queja, emitirá una de dos (2) cartas al demandante

- Una carta de cierre resumiendo las alegaciones del caso en la cual indicará que no hubo una violación de discriminación y por tal motivo el caso será cerrado.
- Una carta de hallazgo resumiendo las alegaciones y las entrevistas sobre el supuesto incidente en esta misma carta se le explicará al demandante si se llevará a cabo alguna acción disciplinaria, entrenamiento adicional al personal o se tomará alguna otra acción necesaria.

Si el demandante desea apelar la decisión, el tendrá 180 días después de la fecha marcada en la carta de cierre o de la carta de hallazgo para hacerlo. El (la) Coordinador, Cynthia Douglas (225) 379-1923.

Título VI ADA analizará los hechos del caso y emitirá su conclusión al apelante en un periodo de 60 días después de haber recibido la apelación.

Si necesita información en otro idioma, póngase en contacto con 337-262-5990.

Lafayette Council on Aging, 160 Industrial Parkway, Lafayette, LA 70508

LaKisha L. Varner, Executive Director

Section 5: Non-discriminación Complaint Form

Section I:			
Name:			
Address:			
Telephone (Home):		Telephone (Work):	
Email Address:			
Accessible Format Requirements?	Large Print	Audio Tape	
	TDD	Other	
Section II:			
Are you filing this complaint on your own behalf?		Yes*	No
*If you answered "yes" to this question, go to Section III.			
If not, please supply the name and relationship of the person for whom you are complaining:			
Please explain why you have filed for a third party:			
Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party.		Yes	No
Section III:			
I believe the discrimination I experienced was based on (check all that apply):			
<input type="checkbox"/> Race <input type="checkbox"/> Color <input type="checkbox"/> National Origin <input type="checkbox"/> Disability			
Date of Alleged Discrimination (Month, Day, Year) _____			
Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form.			

Section IV			
Have you previously filed a non-discrimination complaint with this agency?		Yes	No
Section V			
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, check all that apply:			
<input type="checkbox"/> Federal Agency: _____			
<input type="checkbox"/> Federal Court _____		<input type="checkbox"/> State Agency _____	
<input type="checkbox"/> State Court _____		<input type="checkbox"/> Local Agency _____	
Please provide information about a contact person at the agency/court where the complaint was filed.			

Name:
Title:
Agency:
Address:
Telephone:
Section VI
Name of agency complaint is against:
Contact person:
Title:
Telephone number:

You may attach any written materials or other information that you think is relevant to your complaint.
Signature and date required below

Signature

Date

If information is needed in another language, contact **337-262-5990**.
Please submit this form in person at the address below, or mail this form to:

Lafayette Council on Aging
LaKisha L. Varner, Executive Director
160 Industrial Parkway, Lafayette, LA 70508

**Procedimiento de Queja Titulo No Discriminacion for
Lafayette Council on Aging**

Sección I:	
Nombre: _____	
Dirección: _____	
Teléfono (Casa/Celular): _____	Teléfono (Trabajo): _____
Dirección de correo electrónico: _____	
Sección II:	
¿Está usted presentando esta queja personalmente: Sí <input type="checkbox"/> No <input type="checkbox"/>	
* Si usted contestó "sí" a esta pregunta, pase a la Sección III.	
Si su respuesta es "no", por favor escribe el nombre y la relación de la persona que está presentando la queja en contra:	Nombre: _____ Relación: _____
Si usted está presentando una queja de parte de otra persona, por favor, explica porqué en el siguiente espacio:	
¿Se ha obtenido el permiso de la parte perjudicada, si usted está presentando en nombre de un tercero: Sí <input type="checkbox"/> No <input type="checkbox"/>	
Sección III:	
Creo que la discriminación que experimenté fue basado en (marque todo lo que corresponda): <input type="checkbox"/> Raza <input type="checkbox"/> Color <input type="checkbox"/> Origen Nacional <input type="checkbox"/> Discapacidad	
Fecha de la discriminación alegada (Mes, Día, Año):	Date: _____
Explique, lo más claramente posible, lo que sucedió y porqué usted cree que fue discriminado. Describe todas las personas involucradas. Incluye el nombre y la información de contacto de la persona (s) que lo discriminó (si se conoce), así como los nombres e información de contacto de cualquier testigo. Si necesita más espacio, adjunte hojas adicionales a este formulario:	
Sección IV	
Ha previamente presentado una queja del discriminación con el Lafayette Council on Aging Sí <input type="checkbox"/> No <input type="checkbox"/>	

<p>Sección V</p> <p>¿Ha presentado esta queja con cualquier otro federal, estatal o local, o ante cualquier tribunal federal o estatal? Sí <input type="checkbox"/> No <input type="checkbox"/></p> <p>En caso afirmativo, marque el nombre de todas las que correspondan:</p> <p><input type="checkbox"/> Agencia Federal: _____</p> <p><input type="checkbox"/> Tribunal Federal: _____</p> <p><input type="checkbox"/> Agencia Estatal: _____</p> <p><input type="checkbox"/> Tribunal Estatal: _____</p> <p><input type="checkbox"/> Agencia local : _____</p> <hr/> <p>Sírvanse proporcionar información acerca de una persona de contacto en la corte / entidad donde se presentó la queja.</p> <p>Nombre: _____</p> <p>Título: _____</p> <p>Agencia: _____</p> <p>Dirección: _____</p> <p>Teléfono: _____</p> <p>Sección VI</p> <p>Nombre de la agencia/compañía de queja es contra: _____</p> <p>Persona de contacto: _____</p> <p>Título: _____</p> <p>Teléfono: _____</p> <p>Firma: _____</p> <p>Fecha: _____</p>

Puede adjuntar cualquier material escrito u otra información que considere relevante para su queja.
Firma y fecha requeridas a continuación

Firma	Fecha
-------	-------

Si se necesita información en otro idioma, póngase en contacto con **337-262-5990**.
Envíe este formulario en persona a la dirección que aparece a continuación, o envíe este formulario por correo a:

Lafayette Council on Aging
LaKisha L. Varner, Executive Director
160 Industrial Parkway, Lafayette, LA 70508

Section 6: List of Transit Related Non-Discrimination Investigations, Complaints and Lawsuits

The Lafayette Council on Aging maintains a list or log of all non-discrimination investigations, complaints and lawsuits, pertaining to its transit-related activities.

Check One:

There have been no investigations, complaints and/or lawsuits filed against us since the last plan submission.

There have been investigations, complaints and/or lawsuits filed against us. *See list below. Attach additional information as needed.*

	Date (Month, Day, Year)	Summary (include basis of complaint: race, color, or national origin)	Status	Action(s) Taken
Investigations				
1.				
2.				
Lawsuits				
1.				
2.				
Complaints				
1.				
2.				

Section 7: Public Participation Plan

Strategies and Desired Outcomes

To promote inclusive public participation, the Lafayette Council on Aging will employ the following strategies, as appropriate (make these determinations based on a demographic analysis of the population(s) affected, type of plan, program and/or service under consideration, and the resources available): The goal is to encourage public participation. Your agency should make a variety of efforts to reach the population you serve. (Only list the options that your agency participates in and will have documentation to support). A 5311 program must attempt to reach the public within your service area, not just the riders you currently serve. A 5310 program should attempt to include your defined specialized population of riders and/or their families.

- ✓ Provide for early, frequent and continuous engagement by the public.
- ✓ Select accessible and varied meeting locations and times
- ✓ Employ different meeting sizes and formats
- ✓ Use social media in addition to other resources as a way 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.

Public Outreach Activities

The public outreach and involvement activities conducted by the Lafayette Council on Aging since the last Non-Discrimination Program submission are summarized in the table below.

Enter specific Public Participation activities in the table below.

Event Date	Lafayette Council on Aging Staffer(s)	Activity	Communication Method (Public Notice, Posters, Social Media)	Notes
n/a				

Section 8: Language Assistance Plan

Plan Components

As a recipient of federal US DOT funding, the Lafayette Council on Aging is required to take reasonable steps to ensure meaningful access to our programs and activities by limited-English proficient (LEP) persons.

Limited English Proficient (LEP) refers to persons for whom English is not their primary language and who have a limited ability to read, write, speak or understand English. This includes those who have reported to the U.S. Census that they speak English less than very well, not well, or not at all.

The Lafayette Council on Aging's Language Assistance Plan includes the following elements:

Item #1: The results of the *Four Factor Analysis*, including a description of the LEP population(s), served.

Item #2: A description of how language assistance services are provided by language

Item #3: A description of how LEP persons are informed of the availability of language assistance service

Item #4: A description of how the language assistance plan is monitored and updated

Item #5: A description of how employees are trained to provide language assistance to LEP persons

Four Factor Analysis Methodology

To determine if an individual is entitled to language assistance and what specific services are appropriate, the Lafayette Council on Aging has conducted a *Four Factor Analysis* of the following areas: 1) LEP Demography, 2) Contact Frequency, 3) Importance of Service, and 4) Resources and Costs.

Factor 1: The number or proportion of LEP persons eligible to be served or likely to be encountered by the program or recipient. In addition to the number or proportion of LEP persons served, the Lafayette Council on Aging's will identify:

- (a) How LEP persons interact with the recipient's agency;
- (b) Identification of LEP communities, and assessing the number or proportion of LEP persons from each language group to determine the appropriate language services for each language;
- (c) The literacy skills of LEP populations in their native languages, in order to determine whether translation of documents will be an effective practice; and
- (d) Whether LEP persons are underserved by the recipient due to language barriers.

Factor 2: The frequency with which LEP persons come into contact with the program. Identifies and assesses the frequency Lafayette Council on Aging's staff comes into contact with LEP persons. Examples of contact could include:

- (a) Use of bus and rail service;
- (b) Purchase of tickets through vending machines, outlets, websites, and over the phone;
- (c) Participation in public meetings;
- (d) Customer service interactions;
- (e) Ridership surveys;
- (f) Operator surveys.

Factor 3: The nature and importance of the program, activity, or service provided by the program to people's lives. Generally speaking, the more important the program, the more frequent the contact and the likelihood that language services will be needed.

This section discusses how the Lafayette Council on Aging's program and services impact the lives of person's within the community. The Lafayette Council on Aging will specify the community organizations that serve LEP persons, if available.

Factor 4: The resources available to the recipient for LEP outreach, as well as the costs associated with that outreach. Resource and cost issues can often be reduced by technological advances, reasonable business practices, and the sharing of language assistance materials and services among and between recipients, advocacy groups, LEP populations and Federal agencies. Large entities and those entities serving a significant number of LEP persons should ensure that their resource limitations are well substantiated before using this factor as a reason to limit language assistance.

The summary below discusses the low cost methods the Lafayette Council on Aging uses to provide outreach to LEP persons as well as train staff (and transit provider/lessee, if applicable) on Title VI and LEP principles.

Item #1 – Results of the Four Factor Analysis (including a description of the LEP population(s) served)

Factor 1: The number or proportion of LEP persons eligible to be served or likely to be encountered.

The Lafayette Council on Aging's staff reviewed the American Community Survey data <https://www.census.gov/programs-surveys/acs> and determined that 10,649 (5.9%) persons in the Lafayette Parish speak a language other than English. In Lafayette Parish, of the 10,649 persons with limited English proficiency, 2,414 (1.3%) speak Spanish.

Agency should insert the tables from ACS that document the persons who “speak English less than very well”.

https://data.census.gov/cedsci/table?q=United%20States&t=Language%20Spoken%20at%20Home&g=040000US22%24050000&vintage=2017&layer=state&cid=DP05_0001E

Factor 2: The frequency with which LEP persons come into contact with the program.

Lafayette Council on Aging assessed the frequency with which staff and drivers have, or could have, contact with LEP persons. Lafayette Council on Aging provides approximately 2683 passenger trips per year. If an individual has speech limitations, the dispatcher or driver will work with the Transit Manager and the LADOTD, if needed, to ensure the individual receives access to the transit services.

Factor 3: The nature and importance of the program, activity, or service provided by the program to people's lives.

All of Lafayette Council on Aging's programs are important; however, those related to safety, public transit, nondiscrimination and public involvement are among the most important. The Lafayette Council on Aging is committed to providing meaningful access and will provide written translation for any of its documents, when reasonable, effective and with the available resources. In other cases, the Lafayette Council on Aging will strive to provide alternative but meaningfully accessibility. Moreover, the Lafayette Council on Aging continually evaluates its programs, services, and activities to ensure that persons who may be LEP are always provided with meaningful access. The Title VI policy, complaint form, and LEP policy are available in Spanish upon request.

Factor 4: The resources available for LEP outreach, as well as the costs associated with that outreach.

The Lafayette Council on Aging makes every effort to make its programs, services, and activities, accessible to LEP individuals. The Lafayette Council on Aging will use available resources, both internal and external to accommodate reasonable requests for translations.

Item # 2 – Description of how Language Assistance Services are Provided, by Language

The **Lafayette Council on Aging** has identified, developed, and uses the following:

- a) Individuals who have contact with the public are provided with “I Speak” language cards to identify language needs in order to match them with available services. Language cards verified and distributed by the Director as need.
- b) The **Lafayette Council on Aging** has developed partnerships with local agencies, organizations, law enforcement, colleges/universities, local school districts and social service agencies that are available to assist with it LEP responsibilities.
- c) A list of web based translation services can be provided by contracting the Human Resources Department.

Item # 3 - Description of how LEP Persons are Informed of the Availability of Language Assistance Service

In order to ensure that LEP individuals are aware of **Lafayette Council on Aging’s** language assistance measures,

Lafayette Council on Aging provides the following:

- Title VI Program including the Language Assistance Plan is made available on website, if applicable, and hard copy in central office.
- Drivers and dispatchers are provided “I Speak” language cards to identify language needs in order to match them with available services.

Item # 4 – Description of how the Language Assistance Plan is Monitored and Updated

Lafayette Council on Aging will continue to update the LEP plan as required by U.S. DOT. At a minimum, the plan will continue to be reviewed and updated every three (3) years in conjunction with the Title VI submission, or when data from the 2020 U.S. Census is available, or when it is clear that the concentrations of LEP individuals are present in the **Lafayette Council on Aging** service area.

Updates will continue to include the following:

- The number of documented LEP person contacts encountered annually.
- How the needs of LEP persons have been addressed.
- Determination of the current LEP population in the service area.
- Determination as to whether the need for translation services has changed.
- Determine whether local language assistance programs have been effective and sufficient to meet the need.
- Determine whether **Lafayette Council on Aging’s** financial resources are sufficient to fund language assistance resources needed.
- Determine whether **Lafayette Council on Aging** has fully complied with the goals of this LEP Plan.
- Determine whether complaints have been received concerning **Lafayette Council on Aging’s** failure to meet the needs of LEP individuals

Item # 5 - Description of how Employees are Trained to Provide Language Assistance to LEP Persons

The following training will continue to be provided to **Lafayette Council on Aging** staff:

- Information on the **Lafayette Council on Aging** Title VI Procedures and LEP responsibilities.
- Description of language assistance services offered to the public.
- Use of “I Speak” language cards (used to identify language preference).
- Documentation of language assistance requests
- Use of web-based interpreter services in collaboration with the Affiliated Blind of Louisiana located at 409 W. St. Mary Blvd., Lafayette, LA.
- How to handle a potential Title VI / LEP complaint.

Limited English Proficient (LEP) Resource Materials:

LEP Policy

Lafayette Council on Aging shall provide for communication for limited English proficient riders to ensure them equal opportunity to benefit from services. Family members or friends of limited English proficient riders will not be used as translators unless specifically requested by that individual. Arrangements have been made with a local agency to obtain translators. The agency will also utilize web based translator programs if available.

If you need help with English, please call 337-262-5990.

Lafayette Council on Aging proporcionará comunicación para jinetes competentes inglés limitados para asegurarles igualdad de oportunidades para beneficiarse de los servicios. Miembros de la familia o amigos de jinetes habilidades inglesas limitadas no se utilizará como traductores a menos que pedido específicamente por ese individuo. Han establecido acuerdos con la Agencia para obtener traductores. La agencia también utiliza programas de traductor basado en web si está disponible.

Si usted necesita ayuda con el inglés, por favor llame 337-262-5990.

“I Speak” Language Identification Card

Mark this Box if you speak...	Language Identification Chart	Language
	Mark this box if you read or speak English	English
	Marque esta casilla si lee o habla español	Spanish
	Kos lub voj no yog koj paub twm thiab hais lus Hmoob	Hmong
	如果说中国在方框内打勾	Chinese
	Xin ñaùnh daáu vaøo oâ naøy neáu quyù vò bieát ñiõic vaø noui ñöõic Vieät Ngöð.	Vietnamese
	당신이한국어말할경우이 상자를표시	Korean
	Markahan itong kuwadrado kung kayo ay marunong magbasa o magsalita ng Tagalog.	Tagalog
	Kreuzen Sie dieses Kästchen an, wenn Sie Deutsch lesen oder sprechen	German
	Отметить этот флажок, если вы говорите по-русски	Russian
	Означите ову кућицу ако говорите српски	Serbian
	आप हिंदी बोलते हैं तो इस बक्से को चिह्नित करें	Hindi
	پر نشان لگائیں تو اس باکس بولتے ہیں اردو اگر آپ	Urdu

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

Log of LEP Encounters Any incident where an English deficient rider requests language assistance should be documented here.

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

Section 9: Minority Representation Information

Recipients that have transit-related, non-elected planning boards, advisory councils or committees, or similar committees, the membership of which is selected by the recipient, must provide a table depicting the racial breakdown of the membership of those committees, and a description of efforts made to encourage the participation of minorities on such committees.

A. Minority Representation Table

Table Depicting Membership of Board, Committees, Councils, Broken Down by Race

Body	Caucasian	Hispanic	African American	Asian American	Native American	Two or More Races
Population	5	0	8	0	0	0

B. Efforts to Encourage Minority Participation

Lafayette Council on Aging will continue to improve participation on its boards, committees and councils, by making efforts to encourage minority participation on the board. At a minimum, efforts will be made to reach out to the local Chambers of Commerce to seek assistance with locating various groups that represent a diverse population.

Section 10: Providing Assistance to and Monitoring Subrecipients

1. Does agency provide funding to subrecipients?

No, the agency does not have subrecipients.

Yes. If yes, list the subrecipient names: (list other agency names here)

Agency Name monitors subrecipients using the following process:

1. Agency Name uses the following process for ensuring all subrecipients are complying with the general reporting requirements of FTA C4702.1B: (document the process here)
2. Agency Name collects non-discriminations programs from the subrecipients listed above and reviews programs for compliance by (list the process here)

Section 11: Equity Analysis

1. Has the agency built a facility? (check a response below)

No, the agency has not built a facility.

Yes, the agency has built a facility and completed a equity analysis to compare the equity impacts of various siting alternatives, and the analysis must occur before the selection of the preferred site. (Include at the end of the non-discrimination plan a copy of the equity analysis.)

Section 12: Requirements for Metropolitan Planning Organizations (MPOs)

NA

All MPOs must complete Part Three; in addition to the requirements specified in Part One.

MPO Requirements (Ref: FTA Circular 4702.1B Chapter VI)	Status
1) Does the plan contain a demographic profile of the metropolitan area that includes identification of the locations of minority populations in the aggregate?	<input type="checkbox"/> Y <input type="checkbox"/> N
2) A description of the procedures by which the mobility needs of minority populations are identified and considered within the planning process?	<input type="checkbox"/> Y <input type="checkbox"/> N
3) Demographic maps that overlay the percent minority and non-minority populations as identified by Census or American Community Survey (ACS) data, at the Census tract or block group level, and charts that analyze the impacts of the distribution of State and Federal funds in the aggregate for public transportation purposes, including federal funds managed by the MPO as a designated recipient?	<input type="checkbox"/> Y <input type="checkbox"/> N
4) Analysis of disparate impacts on the basis of race, color, or national origin, and, if so, determines whether there is a substantial legitimate justification for the policy that resulted in the disparate impacts, and if there are alternatives that could be employed that would have a less discriminatory impact.	<input type="checkbox"/> Y <input type="checkbox"/> N
Comments:	