



**STATE OF TENNESSEE
DEPARTMENT OF FINANCE AND ADMINISTRATION
DIVISION OF MENTAL RETARDATION SERVICES
ANDREW JACKSON BUILDING, 13th FLOOR
500 DEADERICK STREET
NASHVILLE, TENNESSEE 37243**

**DMRS Title VI Self-Survey
Survey Period
July 1, 2008 – June 30, 2009**

Company _____
Address _____
City _____ State _____ Zip _____

DMRS Services
Provided

Agency Title VI Coordinator Name _____
Title VI Coordinator Email Address _____ Telephone Number: _____

PLEASE ANSWER ALL QUESTIONS ON THIS SURVEY.

Date of Survey: _____ Type of Survey: Initial Annual Corrective

I. TITLE VI COMPLAINTS

1. Number of Title VI complaints filed during the survey period.
(Please attach a copy of the complaint.) _____
2. Number of Title VI investigations conducted. _____
3. Number of Title VI complaints resolved during the survey period. _____
4. Number of Title VI complaints forwarded to DMRS Regional Office or
Central Office. _____

II. SERVICE NOTIFICATION

5. Number of individuals who receive services through your
agency(unduplicated):
 - a. Waiver Services _____
 - b. State Services _____
 Total number of individuals who receive services through your
agency _____
6. How often are individuals receiving services informed of their Title VI
rights? Annually Semi-Annually
7. Are posters containing Title VI information prominently displayed within the facility? Yes No
8. Do these posters show the name of your agency's Local Title VI Coordinator to whom
complaints should be referred? Yes No

III. LIMITED ENGLISH PROFICIENCY (LEP) ASSESSMENT

Department of Health and Human Services (HHS) regulations, 45 CFR 80.3(b)(2), require all recipients and sub-recipients of federal financial assistance from HHS to provide meaningful access to LEP persons.

Please assess, as accurately as possible, the following:

9. What is the composition by percentage of your geographical service area?
(Use census data for the counties you serve.)

Percentage of non-minority _____
Percentage of minority _____
 African-American _____
 Asian _____
 Hispanic _____
 Other _____

10. What is your agency's contact with individuals (LEP) from different language groups seeking assistance?

Comment:

11. Would denial or delay of access to services or information your agency provides have serious or even life-threatening implications for LEP individuals? Yes No

Comment:

12. Are existing agency resources meeting the needs of LEP persons? Yes No

If no, please explain:

13. Does your agency have a contract for language interpreter services? Yes No

If no, please explain.

IV. TITLE VI POLICIES

14. Does your agency have a written policy stating that services will be provided to all persons without regard to race, color, or national origin? Yes No

15. Does your agency have written procedures for hearing and reviewing Title VI complaints? Yes No

16. Does your agency have a written policy on how individuals are informed about Title VI? Yes No

If no, please explain.

17. Does your agency have a written policy on how individuals with Limited English Proficiency will receive services and benefits for which they are eligible? Yes No

V. TRAINING

18. What methods are used by your agency to ensure that employees are clearly aware of their responsibilities under Title VI? (Please check all that apply.)

- | | | |
|---|--|--|
| <input type="checkbox"/> Career Development | <input type="checkbox"/> New Employee Newsletter | <input type="checkbox"/> Information Packets |
| <input type="checkbox"/> In-Service Policy | <input type="checkbox"/> Brochures/Posters | <input type="checkbox"/> Annual Staffing |
| <input type="checkbox"/> Training Films | <input type="checkbox"/> ID Employee Handbook | <input type="checkbox"/> Orientation |
| <input type="checkbox"/> Personnel Manual | <input type="checkbox"/> Other | |

19. Do employee personnel files contain acknowledgement of training and penalties for non-compliance? Yes No

20. Has your Agency Title VI Coordinator received training on DMRS Title VI requirements? Yes No

21. What additional training beyond the training offered to all employees has your Agency Title VI Coordinator received?

Explain:

22. Number of Title VI training sessions conducted during the survey period? _____

23. Number of employees who received Title VI training during the survey period:

- a. New employee training _____
- b. In-service training _____
- Total number of employees trained _____

VI. OUTREACH

One good way to evaluate your agency's Title VI Compliance may be to seek feedback from the community.

24. Did your agency conduct any public education or outreach efforts directly related to Title VI during the survey period?

Explain:

VIII. GENERAL COMMENTS

If you have any questions, please contact: Brenda Clark (615) 253-6811

Please return this survey to the following e-mail address: annie.bernard@tn.gov