



STATE OF TENNESSEE
DEPARTMENT OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES
DIVISION OF SUBSTANCE ABUSE SERVICES (DSAS)
 5TH FLOOR, ANDREW JACKSON BUILDING
 500 DEADERICK STREET
 NASHVILLE, TENNESSEE 37243-0675

BILL LEE
GOVERNOR

Marie Williams
COMMISSIONER

DSAS Civil Rights - Title VI (6)
Agency Self-Survey Monitoring Form
for
FY24 (7/1/23 -6/30/24)

Agency Name _____
 Address _____
 City, State, Zip _____
 Agency T-VI Coord: _____
 Phone: _____
 Email: _____
 Fax: _____

1. Type of business:
- | | | | |
|---------------------------------|--------------------------|---------------------------------|--------------------------|
| Governmental | <input type="checkbox"/> | Sole Proprietorship | <input type="checkbox"/> |
| Educational | <input type="checkbox"/> | Faith-Based (Charitable Choice) | <input type="checkbox"/> |
| 501-C3 | <input type="checkbox"/> | Minority-Owned | <input type="checkbox"/> |
| Private Corporation | <input type="checkbox"/> | Women-Owned | <input type="checkbox"/> |
| Limited Liability Company (LLC) | <input type="checkbox"/> | | |

The Division of Substance Abuse Services (DSAS) services provided are:
 Prevention Svcs, _____ Treatment Svcs (CoC, WROSC, HIV, Gambling), _____
 Recovery Svcs (ARP), _____ Criminal Justice Svcs (ADAT, CTC, SPOT) _____
 Recovery Court Svcs, _____ Other ____(*identify: _____*).

2. Describe the duties and responsibilities of the Agency *Title VI (6)* Coordinator (**Attach to survey and label as 2A**). * *A Template is Available Upon Request*
3. Describe the services that are provided at your agency (**Attach to survey and label as 3A**). * *A Template is Available upon Request*
4. Identify below the beneficiaries of your programs or services, and include racial and ethnic data, both number and percentage, that demonstrate the extent to which members of minority groups are served by TDMHSAS funds.

Total Number of People Served _____.

Of the total people served, how many from the above total number are:

Adults _____, Youth _____, Male _____, Female _____,

AND from the above total number of people served:

- a) _____ are Caucasian (C) for a percentage of _____%
- b) _____ are African American (AA) for a percentage of _____%
- c) _____ are Hispanic (HSP) for a percentage of _____%
- d) _____ are Asian (ASN) for a percentage of _____%
- e) _____ are American Indian (AI) for a percentage of _____%
- f) _____ are Alaska Native (AN) for a percentage of _____%
- g) _____ are Native Hawaiian and Other Pacific Islander (NH/OP) for a percentage _____%
- h) _____ are Other (O) Please note race (_____) for a percentage of _____%

5. List the sources of federal and state funds your agency received through contracts/grants with DSAS for the current fiscal year (**Attach to survey and label as 5A – if necessary**).

Federal / State Source	Program	Amount

6. How long has your agency been contracting with TDMHSAS - DSAS?

Title VI (6) Compliance

7. Please explain how your agency interprets *Title VI (6)* implementation and compliance. **(Attach to survey and label as 7A).** *A Template is Available upon Request
8. Has the *Title VI (6)* Coordinator attended a *Title VI (6)* coordinators training session during this report period? If yes, when? What method was used? If no, why not?

9. Are *Title VI (6)* posters and brochures (both in English and Spanish) prominently displayed for all to see? If yes, where are they located?

10. What is your agency's process for letting staff, volunteers and service recipients know of their right to file a civil rights complaint? **(Attach to survey and label as 10A).** *A Template is Available upon Request

11. Does the name of your agency's *Title VI (6)* Coordinator, to whom complaints should be referred, appear on the *Title VI (6)* poster?

YES NO

12. Are program brochures or posters available in languages other than English?

YES NO

13. If yes, please list the languages.

14. Identify the vital documents that are available in languages other than English?

15. How does your agency disseminate *Title VI (6)* information?

16. If your agency has sub-contractors, please include how *Title VI (6)* information is disseminated to the sub-contractors?

17. Are your sub-contracts monitored for non-discrimination? YES NO

18. How does your agency monitor for non-discrimination compliance for the agency and the agency's sub-contractors?

19. Did your agency have any *Title VI (6) Complaints* filed from **7/1/23 - 6/30/24** and if so, *attach an explanation:* how many, date of complaint, type of complaint, number of complaints closed (and closed because of 1. administrative e.g. timeliness; 2. failure to cooperate, etc.; 3. failure to meet prima facie case; and 4. settlement and/or resolution reached) and if not closed what is the current status? YES _____ NO _____

20. How many *Title VI (6) Complaints* from **7/1/23 - 6/30/24** were referred to TN Department of Human Rights or Federal Department of Justice or other agency (identify the agency and the reason).

21. Did your agency have any *Lawsuits* from **7/1/23- 6/30/24** alleging discrimination on the basis of race, color or national origin? **If no, then write below, that "there were no lawsuits filed alleging discrimination on the basis of race, color or national origin under any federal or state funded program or activity."*

22. Are records kept of *Title VI (6) Complaints*? If yes, for how long?

23. What is the number of complaints was resolved during this report period? _____

Service Region

24. List the Tennessee Counties that you serve: _____

25. What is the Racial Composition, by percent, of your geographical service area? *
Use the Most Recent Census Numbers for the counties you serve by accessing www.census.gov "quick facts" to get the data within the last 3 years/2021. Please provide the grand total of percentages of each racial composition for all counties you serve.

Note the source of your information _____

Note the Year of this data _____.

- | |
|--------------------------------------------------------------------|
| a) _____ % are Caucasian (C). |
| b) _____ % are African American (AA). |
| c) _____ % are Hispanic (HSP) or Latino (LAT). |
| d) _____ % are Asian (ASN). |
| e) _____ % are American Indian (AI). |
| f) _____ % are Alaska Native (AN). |
| g) _____ % are Native Hawaiian and Other Pacific Islander (NH/OP). |
| h) _____ % are Other (O) Please note race (_____). |

Service Recipients

26. Are service recipients informed of their civil rights and how to file a civil rights complaint under *Title VI (6)* and other laws regarding discrimination?

YES NO

27. Who is responsible for informing your services recipients of their civil rights under *Title VI(6)* ?

28. What method is used to inform service recipients of their *Title VI (6)* rights and how to file a complaint?

29. How is the process of informing service recipients of their civil rights documented?

Employees and Volunteers

30. When are new employees and volunteers informed of Civil Rights and *Title VI (6)* (circle the one that applies): at orientation; within thirty (30) days of service; within sixty (60) days of service; after sixty days of service. Who informs them and what method is used:

31. Is this particular process being periodically reviewed and monitored? YES NO

32. Are new employees and volunteers trained on *Title VI (6)* before beginning services?
 YES NO

33. Does each employee's personnel file contain a record of *Title VI (6)* training:

upon service start YES NO

and **annually** thereafter YES NO

34. What is the total number of agency employees (both full & part-time) _____, and Agency volunteers_____.

Of the above total number, how many were Title VI (6) trained (with documentation in their personnel file) during July 1, 2023 to June 30, 2024:

Employees (both full & part-time) _____ Volunteers _____.

With the percentage of the total number being: Employees trained _____% Volunteers trained _____%

***Please attach a list of employees and volunteers names that were Title VI (6) trained during 7/1/23-6/30/24 and the date that they were trained (Attach to survey and label as 34A).**

35. Identify the racial/national origin composition of your agency EMPLOYEES by providing the total numbers and percentages by race, color and/or national origin.

The Total Number of Agency Full-time Employees is _____ Part-time Employees is _____ which Totals (together) _____.
Of these employees:
a) _____ are Caucasian (C) for a percentage of _____%
b) _____ are African American (AA) for a percentage of _____%
c) _____ are Hispanic (HSP) for a percentage of _____%
d) _____ are Asian (ASN) for a percentage of _____%
e) _____ are American Indian (AI) for a percentage of _____%
f) _____ are Alaska Native (AN) for a percentage of _____%
g) _____ are Native Hawaiian and Other Pacific Islander (NH/OP) for a percentage of _____%
h) _____ are Other (O) <i>Please note race (_____)</i> for a percentage of _____%

36. When (date/s) was the most current training or technical assistance conducted by your agency for *Title VI (6)* compliance and who conducted the training or technical assistance?

37. Does all TDMHSAS direct service contracts entered into by your agency contain a *Title VI (6)* statement of compliance? YES NO

Governing/Advisory Board Members

38. What is the racial composition, by total number and percentage, by race of your agency's Advisory Board or Governing Body?

The Total Number of Advisory Board or Governing Board members are _____.

Of these members:

- a) _____ are Caucasian (C) for a percentage of _____%
- b) _____ are African American (AA) for a percentage of _____%
- c) _____ are Hispanic (HSP) for a percentage of _____%
- d) _____ are Asian (ASN) for a percentage of _____%
- e) _____ are American Indian (AI) for a percentage of _____%
- f) _____ are Alaska Native (AN) for a percentage of _____%
- g) _____ are Native Hawaiian and Other Pacific Islander (NH/OP) for a percentage of _____%
- h) _____ are Other (O) *Please note race (/_____/)* for a percentage of _____%

39. What is the racial composition by number and percent of your geographical service area? (Refer to Question 25 and if answered, write below "Refer the answer on Q.25)

40. What are the lengths of the terms for an individual to serve on the Board?

41. How are members of your Governing/Advisory Board selected, what is the process?

42. If your geographic region has a non-white population that represents a minimum 5% or more of the geographic service area population, your Governing Body should reflect this make-up.

Does your Governing Body reflect your geographic region? YES NO

If "NO," what steps are being taken to obtain and enhance this representation? (**Attach to survey and label as 42A**).

Limited English Proficiency (LEP)

43. Please conduct a LEP Four Factor Analyses by answering the following questions:

I. What is the number or proportion of LEP persons eligible to be served by your program/s (Refer to your Regional Census Data on Q.25):

II. What is the frequency with which LEP individuals come in contact with your program/s: _____

___ If minimal LEP frequency, what are your agency's barriers preventing more LEP frequency:

III. What is the nature and importance of the program, activity, or service you provide to people's lives:

and

IV. What are the resources available to the LEP in your area and what is your agency doing to enhance LEP resources: _____

44. When your agency has had to provide translation to beneficiaries, who provided that service?

Please list:

Name of Translation Service	Language Translated	Location	Phone Number

45. How is this service paid for?

46. How many staff members are proficient in other languages and in what language/s?

47. What are your specific gaps in the service system that hinder your ability to provide language interpreters?

Title VI (6) Policy & Procedure Documents

48. Identify your agency's Title VI (6) (Race, Color & National Origin) Complaint Policy and Procedure, that describe: **a)** the complaint process, **b)** the Investigation process, **c)** the report of findings process, **d)** the hearings and Appeals procedures, **e)** a copy of the discrimination complaint forms and **f)** Retaliation policy and procedures.

(Attach to survey and label as 48A). * A Template is Available for a) –e) Upon Request

49. Identify your agency's Title VI (6) Training Policy and Procedure, which describe: **a)** the Title VI (6) training program provided to staff, volunteers, contractors service recipients, **b)** the dates that Title VI training was made available to employees, volunteers, contractors, and service recipients, 100% **c)** the total number of agency staff and the total number of staff trained (including the percentage) 100% and **d)** The number of volunteers that were trained (including the number and percentages), 100% and **e)** list proposed future dates

for Title VI training that will be offered to all staff, volunteers, contracts staff and sub-recipients during July 1, 2024-June 30, 2025.

(Attach to survey and label as 49A). * A Template is Available upon Request

50. Identify your agency's Title VI (6) Limited English Proficiency (LEP) policy and procedure that describe: **a)** the policy and procedures, **b)** a list of translator and interpreter services available, **c)** agency documents that have been translated and in which languages, and **d)** the steps and goals toward breaking down barriers to LEP challenges.

(Attach to survey and label as 50A). * A Template is Available upon Request

Other Document/s

51. Identify your agency's (non-civil rights) Fraud, Waste and Abuse Policy and Procedure (Attach to survey and label as 51A). * A Template is Available upon Request

Declaration

"I declare that I have completed this self-survey to the best of my ability and that the information provided is correct and complete."

Signature: _____ *Date:* _____

Printed Name _____ *Position* _____

*** Please return this self-survey by July 31, 2024:**

1) Completed - all questions are answered and all attachments are attached;

2) Signed by Authorizing Agent;

3) Sent by e-mail to Donathan Knowles at donathan.knowles@tn.gov by July 31, 2024.

4) Timely - received by DSAS from 7/1/23 - 7/30/24

"Thank you for your cooperation, thoroughness, and diligence."

DK Revised 4/17/2024