

Notifying the Public of Rights Under Title VI

Arrowhead West, Inc.

- Arrowhead West, Inc. (AWI) operates its program and services without regard to race, color and national origin in accordance with Title VI of the Civil Rights Act. Any person who believes he or she has been aggrieved by any unlawful discriminatory practices under Title VI may file a complaint with AWI.
- For more information on the AWI's civil rights program and the procedures to file a complaint, contact the Human Resource Manager, Sheila Bergkamp at (620) 227-8803; e-mail sbergkamp@arrowheadwest.org; or visit our administrative office at 1100 East Wyatt Earp Boulevard, Dodge City, KS 67801. For more information, visit www.arrowheadwest.org.
- A complainant may file a complaint directly with the Federal Transit Administration by filing a complaint with the Office of Civil Rights, Attention: Title VI Program Coordinator, East Building, 5th Floor-TCR, 1200 New Jersey Avenue, SE, Washington, DC 20590.
- If information is needed in another language, contact (620) 227-8803.
- Si necesita información en otro idioma, llame al (620) 227-8803.

This notice is posted on the agency website at www.arrowheadwest.org and in public areas of the agency's office.

Title VI Complaint Procedure

The following pertains only to Title VI complaints regarding the services of Arrowhead West, Inc.

Title VI, 42 U.S.C §2000d et seq., was enacted as part of the Civil Rights Act of 1964. At the heart of the regulation is the following statement:

No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.

Arrowhead West, Inc. has in place a Title VI Complaint Procedure, which outlines a process for local disposition of Title VI complaints and is consistent with guidelines found in Chapter III of the Federal Transit Administration Circular 4702.1B, dated October 1, 2012. If you believe that Arrowhead West, Inc.'s federally funded programs have discriminated your civil rights on the basis of race, color or national origin you may file a written complaint by the procedure outlined below:

1. Submission of Complaint

Any person who feels that he or she, individually or as a member of any class of persons, on the basis of race, color, or national origin has been excluded from or denied the benefits of, or subjected to discrimination caused by Arrowhead West, Inc., may file a written complaint with Arrowhead West, Inc.'s Human Resource Manager. A sample complaint form is available to download at www.arrowheadwest.org and is available in hard copy at the offices of Arrowhead West, Inc. Upon request, Arrowhead West, Inc. will mail the complaint form. **Such complaints must be filed within 180 calendar days after the date the discrimination occurred.**

Notes: Assistance in the preparation of any complaints will be provided to a person or persons upon request and as appropriate. If information is needed in another language, then contact the Arrowhead West, Inc. Human Resource Manager at (620) 227-8803.

Nota: Se prestará asistencia en la preparación de cualquier queja a una persona o personas que lo soliciten, cuando proceda. Si necesita información en otro idioma, póngase en contacto con Arrowhead West, Inc. Gerente de Recursos Humanos al (620) 227-8803.

Complaints should be mailed to or submitted by hand to:

Arrowhead West, Inc.
ATTN: Human Resource Manager
1100 East Wyatt Earp Boulevard
Dodge City, KS 67801

2. Referral to Review Officer

Upon receipt of a complaint, the Human Resource Manager of Arrowhead West, Inc. shall appoint one or more staff review officers, as appropriate, to evaluate and investigate the complaint. If necessary, the Complainant shall meet with the staff review officer(s) to further explain his or her complaint. The staff review officer(s) shall complete their review no later than 45 calendar days after the date the agency received the complaint. If more time is required, the Human Resource Manager shall notify the Complainant of the estimated timeframe for completing the review. Upon completing the review, the staff review officer(s) shall make a recommendation regarding the merit of the complaint and whether remedial actions are available to provide redress. Additionally, the staff reviewer(s) may recommend improvements to Arrowhead West, Inc. processes relative to Title VI as appropriate. The staff review officer(s) shall forward their recommendations to the Human Resource Manager for concurrence. If the Human Resource Manager concurs, he or she shall issue Arrowhead West, Inc.'s written response to the Complainant. This final report should include a summary of the investigation, all findings with recommendations, and corrective measures where appropriate.

Note: Upon receipt of complaint, Arrowhead West, Inc. shall forward a copy of this complaint and the resulting written response to the appropriate KDOT and FTA-Region 7 contacts.

3. Request for Reconsideration

If the Complainant disagrees with the Human Resource Manager's response, he or she may request reconsideration by submitting the request, in writing, to the Human Resource Manager within 10 calendar days after receipt of the Human Resource Manager's response. The request for reconsideration shall be sufficiently detailed to contain any items the Complainant feels were not fully understood by the Human Resource Manager. The Human Resource Manager will notify the Complainant of his or her decision in writing either to accept or reject the request for reconsideration within 10 calendar days. In cases where Arrowhead West, Inc.'s Human Resource Manager agrees to reconsider, the matter shall be returned to the staff review officer(s) to re-evaluate in accordance with Paragraph 2 above.

4. Appeal

If the request for reconsideration is denied, the Complainant may appeal the Human Resource Manager's response by submitting a written appeal to Arrowhead West, Inc.'s Board of Directors no later than 10 calendar days after receipt of the Human Resource Manager's written decision rejecting reconsideration. The Board of Directors will then make a determination to either request re-evaluation by the staff review officer(s) or forward the complaint to KDOT for further investigation.

5. Submission of Complaint to the State of Kansas Department of Transportation

If the Complainant is dissatisfied with Arrowhead West, Inc.'s resolution of the complaint, he or she may also submit a written complaint within 180 days after the alleged date of discrimination to the State of Kansas Department of Transportation for further investigation.

KDOT Office of Contract Compliance
Eisenhower State Office Building
700 Southwest Harrison, 3rd Floor West
Topeka, KS 66603

Title VI Complaint Form

The purpose of this form is to assist you in filing a complaint with Arrowhead West, Inc. You are not required to use this form; a letter containing the same information will be sufficient.

Section I				
Name:				
Address:				
Home Telephone:			Work Telephone:	
E-Mail Address:				
Accessible Format Requirements?	Large Print		Audio Tape	
	TDD		Other	
Section II				
Are you filing this complaint on your 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				
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 Title VI 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?	Yes	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

Please submit this form in person at the address below, or mail this form to:

Arrowhead West, Inc.
ATTN: Human Resource Manager
1100 East Wyatt Earp Boulevard
Dodge City, KS 67801

¿Ha presentado una queja del Título VI con esta agencia anteriormente?	Si	No
Sección V		
¿Ha presentado esta queja con cualquier federal, estatal o agencia local, o ante cualquier tribunal federal o estatal?	Si	No
Si usted contestó "Si", marque todo lo que corresponda:		
<input type="checkbox"/> Agencia Federal:	<input type="checkbox"/> Tribunal Federal:	
<input type="checkbox"/> Agencia Estatal:	<input type="checkbox"/> Tribunal Estatal:	
<input type="checkbox"/> Agencia Local:		
Por favor, proporcione información acerca de la persona de contacto en la agencia /tribunal donde se presentó la queja:		
Nombre:		
Titulo:		
Agencia:		
Dirección:		
Telefono:		
Sección VI		
Nombre de la agencia en cual queja es contra:		
Persona de Contacto:		
Título:		
Número Telefónico:		

Puede añadir cualquier material escrito o cualquier otra información que usted considere relevante para su queja.

Firma y fecha requerida abajo.

Firma

Fecha

Por favor, envíe este formulario en persona en la dirección indicada más abajo, o envíe por correo este formulario a:

Arrowhead West, Inc.
ATTN: Gerente de Recursos Humanos
1100 East Wyatt Earp Boulevard
Dodge City, KS 67801

List of Title VI Investigations, Lawsuits and Complaints

	Date (Month, Day, Year)	Summary (Include basis of complaint: Race, Color or National Original)	Status	Action(s) Taken
Investigations				
1.				
2.				
Lawsuits				
1.				
2.				
Complaints				
1.				
2.				

There were no investigations, lawsuits or complaints in the last three years.

Transit Public Participation Plan Outline

1. Brief description of provider's activities and services.

Arrowhead West, Inc. (AWI) provides support services to children and adults with developmental disabilities and delays. Specific support services include occupational, speech and physical therapy, screenings and evaluations for children ages birth to three. For adults, services include work services, community integrated employment, adult life skills training and a retirement program. Residential services provided to adults include supervised and supported living services, and case management.

AWI serves clients with disabilities from a 14-county service area that include counties of Ford, Gray, Hodgeman, Edwards, Clark, Kiowa, Comanche, Ness, Meade, Sedgwick, Barber, Harper, Kingman and Pratt. AWI offices are located in Dodge City, Medicine Lodge, Pratt, Kinsley and Wichita.

2. Brief description of activities that would warrant public participation (i.e. fare changes, changes to service hours, route adjustments, service area changes).

AWI would notify responsible parties and/or clients prior to any fare changes, service hour changes and policy or procedure changes.

3. Brief description of the proactive public participation strategies would be used.

AWI is currently under U.S.C. 49-5310 funding and only providing transportation services to the agency's clients.

4. Brief description of the outreach methods to engage minority and Limited English Proficiency (LEP) individuals (i.e. translation of public meeting materials, providing translation services if requested, targeted media messages in low income neighborhoods of service area, work with existing neighborhood and advocacy organizations).

AWI translates required materials to Spanish and uses Spanish speaking employees for interpreters.

5. Brief description of the desired outcomes of the agency's public participation efforts.

AWI is currently under U.S.C. 49-5310 funding and only providing transportation services to the agency's clients.

6. Brief summary of recent outreach efforts over the past three years.

AWI and the local public transportation provider, The City of Dodge City, have met in the past to discuss transportation services. It has been determined that they cannot meet all the transportation needs of our clients at this time due mainly to the city's limited hours of operation.

Four Factor Analysis

The purpose of developing a Limited English Proficiency (LEP) Plan, as a recipient of federal funds, is to identify the extent of LEP individuals and identify ways that the transit agency can reduce or eliminate barriers to LEP individuals.

1. Identify number of proportion of LEP individuals that can utilize the service provided by Arrowhead West, Inc.

Using the information from the 2018 American Community Survey 5-year estimates the Spanish group has more than 5% of the total population and more than 1000 persons that “speak English less than very well” and will require written translation.

2. Identify the frequency in which LEP individuals come in contact with the service.

Arrowhead West, Inc. in Dodge City currently has 52 Hispanic clients out of a total of 162 clients. Thirty-two percent of Arrowhead West, Inc. clients speak Spanish.

3. Identify the importance of the service to the LEP community.

We provide transportation for medical, employment facilities, day service programs, shopping and social events to clients with IDD in Arrowhead West, Inc. services. We go through an interpreter to communicate and schedule rides for individuals who speak English less than very well.

4. Identify the resources available and the respective costs of these resources.

Currently, the interpreters are Arrowhead West, Inc. employees or family members of clients who speak English less than very well, so there are no additional costs associated with this service.

Limited English Proficiency Plan

Utilizing the information gathered from the Four Factor Analysis, the following plan is developed in order to provide the necessary assistance to LEP persons.

1. Identified LEP Individuals.

Spanish meets the criteria of more than 5% of total population or more than 1,000 persons, whichever is less, that “speak English less than very well.”

2. Language Assistance Measures.

Arrowhead West, Inc. will translate required materials into Spanish. AWI will also use there Spanish speaking employees for interpreters. If needed, we will use online translation tools.

3. Training Staff.

The interpreter will help with scheduling a ride. The drivers will communicate as well as possible with the riders during the trip.

4. Providing Notice.

The LEP Plan will be posted on the agency’s website, www.arrowheadwest.org. The LEP plan will be provided to any person or agency requesting a copy. The person to contact in regards to the LEP Plan is the Human Resource Manager and can be reached via phone at (620) 227-8803.

5. Monitoring and Updating the LEP Plan.

Arrowhead West, Inc. will update the plan according to the Title VI update schedule, which is every three years. The plan will also be updated any time changes in the demographics of the agency’s service area are deemed significant in regards to LEP persons.

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

Dodge City

Body	White	African American	Native American	Asian American	Other	More than One Race
Population	89.4%	2.0%	.5%	1.5%	4.1%	2.5%
Agency Board of Directors	100%					
Agency Staff	58.1%	9.5%	1.4%		31.0%	