



**Lakes Region
Mental Health Center**

Title VI Plan

2022

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I. INTRODUCTION

LAKES REGION MENTAL HEALTH CENTER'S (LRMHC) COMMITMENT TO CIVIL RIGHTS

The LRMHC Title VI Program has been prepared to ensure that the level and quality of LRMHC demand response services are provided in a nondiscriminatory manner and that the opportunity for full and fair participation is offered to agency riders and other community members. Additionally, through this program, LRMHC has examined the need for services and materials for persons for whom English is not their primary language and who have a limited ability to read, write, speak, or understand English.

While it is a matter of principle that LRMHC is committed to ensuring that no person is excluded from participation in, or denied the benefits of, or subjected to discrimination in the receipt of any of LRMHC services on the basis of race, color, or national origin in accordance with Title VI of the Civil Rights Act and other statutes and authorities. The contents of this program have been prepared in accordance with Section 601 of Title VI of the Civil Rights Act of 1964 and Executive Order 13116 (Improving Access to Services for Persons with Limited English Proficiency) and other statutes that prohibit discrimination in Federally assisted programs and activities.

"No person shall, on grounds 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 assistance." - Civil Rights Act of 1964

Under the Civil Rights Act of 1964, and as a recipient of federal funding under the programs of the Federal Transit Administration (FTA) of the U.S. Department of Transportation (US DOT), LRMHC has an obligation to ensure that:

- ◆ The benefits of its transportation service are shared equitably throughout the service area;
- ◆ The level and quality of bus services are sufficient to provide equal access to all riders in its service area;
- ◆ No one is precluded from participating in LRMHC service planning and development process;
- ◆ Decisions regarding service changes or facility locations are made without regard to race, color or national origin and that development and urban renewal benefitting a community as a whole not be unjustifiably purchased through the disproportionate allocation of its adverse environmental and health burdens on the community's minority population; and
- ◆ A program is in place for correcting any discrimination, whether intentional or unintentional.

II. GENERAL REQUIREMENTS

Notice to the Public

To make LRMHC riders aware of its commitment to Title VI compliance, and their right to file a civil rights complaint, LRMHC has presented the following information, in English on its website.

Your Civil Rights

Lakes Region Mental Health Center Transit (LRMHC) operates its programs and services without regard to race, color or national origin in accordance with Title VI of the Civil Rights Act. Any person who believes they have been aggrieved by any unlawful discriminatory practice under Title IV may file a complaint with the agency.

Discrimination Complaint Procedures

LRMHC has established a process for riders to file a complaint under Title VI. Any person who believes that they has been discriminated against on the basis of race, color or national origin in accordance with Title VI of the Civil Rights Act and other statutes and authorities that prohibit discrimination in Federally assisted programs and activities by the agency may file a Title IV complaint by completing and submitting the agency's Title VI Complaint available at our administrative offices or on our website www.lrmhc.org. LRMHC will notify NH Department of Transportation of all formal complaints within 5 business days of receiving the complaint.

LRMHC Title VI Complaint Process

If you believe that you have received discriminatory treatment by the LRMHC transit on the basis of race, color or national origin in accordance with Title VI of the Civil Rights Act and other statutes and authorities that prohibit discrimination in Federally assisted programs and activities, you have the right to file a complaint with the Chief Quality Officer.

Methods of filing a complaint:

Complaints may be received through our website www.lrmhc.org and click on For Our Patients, then Patient Complaint. Complete the Complaint Form, and send it to the Attn: Chief Quality Officer. Verbal complaints are accepted and transcribed by the transportation coordinator or by the Chief Quality Officer. To make a verbal complaint, call 603-524-1100 and ask for the Transportation Coordinator or Chief Quality Officer. Written complaints can be mailed to our administrative office at 40 Beacon Street East, Laconia, NH 03246. If a form is needed, please visit our office from 9am-5pm.

A person may file a complaint directly with Federal Transit Administration, Office of Civil Rights, Attention: Title VI Program Coordinator, 1200 New Jersey Ave., SE, Washington, DC 20590 or online: <https://www.transit.dot.gov/regulations-and-guidance/civil-rights-ada/file-complaint-fta>.

Attachment 1: Complaint form.

LRMHC investigates complaints received no more than 180 days after the alleged incident. LRMHC will process complaints that are complete. Once the complaint is received, the agency will investigate the complaint by contacting the individual who submitted the complaint directly. This contact will lead to resolution and/or formal investigation by LRMHC.

LRMHC has up to thirty days to investigate the complaint. If more information is needed to resolve the case, the transportation coordinator may contact the complainant. The complainant has thirty days from the date of the letter to send requested information to the investigator assigned to the case.

If the LRMHC investigator is not contacted by the complainant or does not receive the additional information within thirty days, LRMHC 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 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 violation and that the case will be closed.

A LOF summarizes the allegations and the interviews regarding the alleged incident, and explains the final conclusion of the incident. Human resources will attend to any disciplinary action and maintain records for any additional staff trainings that occurred due to this incident. If the complainant wishes to appeal the decision, she/he has ten days after the date of the letter or the LOF to do so.

Active Lawsuits, Complaints or Inquiries Alleging Discrimination

LRMHC maintains a record of active investigations conducted by FTA and entities other than FTA, including lawsuits and complaints naming LRMHC that allege discrimination on the basis of race, color, religion, national origin, sex, disability, or age in accordance with Title VI of the Civil Rights Act and other statutes and authorities that prohibit discrimination in Federally assisted programs and activities. This record includes the date that the transit-related Title VI investigation, lawsuit or complaint was filed; a summary of the allegation(s); the status of the investigation, lawsuit or complaint, and actions taken by LRMHC in response, or final findings related to the investigation, lawsuit, or complaint.

As of the writing of this revision, there have been zero complaints and none are currently pending which allege discrimination on the grounds of race, color, religion, national origin, sex, disability or age in accordance with Title VI of the Civil Rights Act and other statutes and authorities that prohibit discrimination in Federally assisted programs and activities.

III. LRMHC'S PUBLIC PARTICIPATION PLAN

Key Principles

The LRMHC Public Participation Plan (PPP) has been prepared to ensure that no one is precluded from participating in agency's service planning and development process. It ensures that:

- Potentially affected community members will have an appropriate opportunity to participate in decisions about a proposed activity that will affect their environment and/or health;
- The public's contribution can and will influence LRMHC's decision making;
- The concerns of all participants involved will be considered in the decision-making process; and,
- LRMHC will seek out and facilitate the involvement of those potentially affected.

Through an open public process, LRMHC has developed a public participation plan to encourage and guide public involvement efforts and enhance access to agency transportation decision-making process by minority and Limited English Proficient (LEP) populations. The public participation plan describes the overall goals, guiding principles and outreach methods that LRMHC uses to reach its riders.

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. It includes people who reported to the U.S. Census that they speak English less than very well, not well, or not at all.

Limited English Proficient (LEP) Goals of the Public Participation Plan

The overarching goals of LRMHC's PPP include:

- Clarity in Potential for Influence - The process clearly identifies and communicates where and how participants can have influence and direct impact on decision making.
- Consistent Commitment - LRMHC communicates regularly, develops trust with riders and our community and builds community capacity to provide public input.
- Diversity - Participants represent a range of socioeconomic, ethnic and cultural perspectives, with representative participants including residents from low-income neighborhoods, ethnic communities and residents with Limited English Proficiency
- Accessibility - Every reasonable effort is made to ensure that opportunities to participate are physically, geographically, temporally, linguistically, and culturally accessible.
- Relevance - Issues are framed in such a way that the significance and potential effect is understood by participants.
- Participant Satisfaction - People who take the time to participate feel it is worth the effort to join the discussion and provide feedback.
- Partnerships - LRMHC develops and maintains partnerships with communities through the methods described in its public participation plan.
- Quality Input and Participation - That comments received by LRMHC are useful, relevant and constructive, contributing to better plans, projects, strategies and decisions.

Objectives of the Public Participation Plan

LRMHC' Public Participation Plan is based on the following principles:

- Flexibility - The engagement process will accommodate participation in a variety of ways and be adjusted as needed.
- Inclusiveness - LRMHC will proactively reach out to and engage low income, minority and LEP populations from the service area.
- Respect - All feedback will be given careful and respectful consideration.
- Proactive and Timeliness - Participation methods will allow for early involvement and be ongoing.
- Clear, Focused and Understandable - Participation methods will have a clear purpose and use for the input, and will be described in language that is easy to understand.
- Honest and Transparent - Information provided will be accurate, trustworthy and complete.
- Responsiveness – LRMHC will respond and incorporate appropriate public comments into transportation decisions.
- Accessibility – Meetings will be held in locations which are fully accessible and welcoming to all area residents, including, but not limited to, low-income and minority members of the public and in locations relevant to the topics being presented and discussed.

Regional Partnership

An oversight of LRMHC service and activities is conducted internally, as well as externally through both Mid-State and Grafton County RCCs.

IV. LRMHC'S PUBLIC PARTICIPATION PROCESS

Outreach Efforts

LRMHC seeks and receives feedback on its services from riders, drivers, staff members and other members of the community, as well as the members of the Mid-State and Grafton County Regional Coordinating Councils (RCCs) for Community Transportation which assists LRMHC in its advisory capacity.

LRMHC Mediums

- Website at www.lrmhc.org
- Social Media – Facebook, Twitter and LinkedIn and has over 2,000 followers
- Print – newspapers and other periodicals
- Electronic Donor Newsletters – Are issued quarterly to over 700 recipients
- Radio – We contract with two radio stations to air periodic PSAs throughout each month

- Outdoor – Agency logo on both transportation buses
- Community Awareness Events – including schools, municipalities, partner organizations and other community-related events
- Quality Improvement Committee of the Board: a standing committee that includes in its membership Board members, staff, community members, clients and family members. It is chaired by a Board member. The goal of the committee is to ensure that our clients receive care of the highest quality, in accordance with applicable laws, rules and regulations.
- Patient Advisory Committee: Committee: At Lakes Region Mental Health Center, we believe that each individual must take part in his or her recovery. This is why we value input from those we serve. The Patient Advisory Committee meets monthly and serves as a forum for discussion between LRMHC staff and clients.
- Finance and Investment Committee of the Board: is a standing committee consisting of Board and community members. It is chaired by the Board Treasurer. The committee monitors all financial aspects of the organization except that of fundraising, recommends policies to the Board, reviews and oversees the creation of financial statements to be presented to the Board, reviews the annual budget and recommends its approval to the Board, monitors financial statements and financial investments, monitors compliance with federal, state and other reporting requirements, oversees and implements an investment policy for the assets of the organization, oversees preparation and filing of the annual CPA audit and IRS Form 990, and reviews and makes recommendations on other financial matters as they arise or as needed.
- Development Committee of the Board: is a standing committee of the Board, chaired by a Board member. The committee works with development staff to create and implement a development plan, incorporating activities to yield additional revenue, work with staff to identify, cultivate, and solicit funds from various sources of support, and develops guidelines to ensure stakeholders are acknowledged appropriately, fundraising efforts are cost-effective, and ethical practices are followed. Community members, staff, patients and patient families are invited to participate in local community awareness events. Ad hoc committees are formed as needed to facilitate special events and other fundraising activities (such as the Auction Committee that meets from May to November).
- Governance Committee of the board: is a standing committee typically chaired by the Board Secretary. The committee identifies and nominates new and returning individuals from the community for election to the Board and Board officers, regularly reviews the bylaws and makes recommendations to the Board for change/modification, periodically reviews Board and advisory council formation, roles, responsibilities and policy, periodically facilitates Board evaluation, and ensures all Board members execute Conflict of Interest statements annually.
- LRMHC Board of Directors: Our board consists of individuals from diverse professional and personal backgrounds who reside within the towns that make up our catchment area. Members felt that it was critical to have strong representative from these towns given the large rural geographical nature of our service area. It's also important to have access to different perspectives as it relates to patient care. For this reason, we have a patient and several persons who have a family member with a mental illness diagnosis serve as members of the board. Our meetings are open to the public and transportation can be arranged if needed. Board members and community members are represented on all standing committees of the board. Our board is predominately white with one member being an Ethiopian refugee who now serves in law enforcement. Our Governance committee is responsible for board member recruitment.

- LRMHC does attend town budget, Selectboard and town meetings of the towns we serve. Given that the majority of municipalities provide funding to LRMHC to help offset the cost of providing Emergency Services to residents, these relationships are important to LRMHC. Development staff attends all hearings and makes presentation to town officials about the services that were provided to LRMHC to residents in each town. It is also an opportunity to raise awareness and address questions about the important work that we do. When necessary, our CEO and CFO work with local officials regarding topics that pertain to the provision of services and our recognition as a public health organization.

Addressing Comments

The Incorporation of Public Comments into Decisions

Any comments LRMHC receives are given careful, thoughtful consideration. These come from the public often in the form of direct feedback. In addition, patient surveys, social media or through staff, board and committee members feedback is obtained. Oral comments are transcribed and distributed accordingly so that these too are given appropriate attention. All comments are addressed. Any unresolved issues may be presented to the LRMHC Board of Directors for consideration.

Identification of Stakeholders

Our Community Partners

Stakeholders are those who are either directly or indirectly affected by a plan, or the recommendations of the plan. Those who may be adversely affected, or who may be denied benefits of a plan’s recommendation(s), are of particular interest in the identification of specific stakeholders. Stakeholders can come from a number of groups including general citizens/residents, minority and low-income persons, public agencies, and private organizations and businesses.

Stakeholder List

Any community organization or person can be added to the LRMHC stakeholder list and receive regular communications regarding service changes by contacting the LRMHC administrative office at 603-524-1100. Local organizations and businesses can also request that a speaker from LRMHC attend their regular meeting at the same number provided above.

V. DECISION MAKING BODIES

Board of Director and Executive Management

At Lakes Region Mental Health Center, the board creates the overarching strategic plan (3 years) that encompasses the following four broad goals: Organizational Stability, Technology Investment, Enhanced Clinical Services and Enhanced Collaborations. The plan also identifies the specific action steps that will be undertaken to meet these four goals and outlines timelines and metrics. Based on this guidance, decisions regarding policy, procedures, processes, service delivery changes, and

service programming are made by the Executive Management Team. LRMHC’s **Board of Directors** is composed of 11 Board members and two committee members representing many of the towns and cities within our catchment area. LRMHC also has a number of standing committees made up of board and community members and their responsibilities are outlined above. Our QI and Clinical team who holds ongoing meetings help guide decisions regarding routes, schedules, and other topics important to the community and our patients. Patients are encouraged to notify LRMHC anytime they need transportation so we are able to provide on-call service wherever possible. All Board and Executive/Internal meetings are held in our conference center at our 40 Beacon Street East location in Laconia or on zoom. Meeting notices are always posted in advance and sent electronically.

Body	Caucasian	African American	Hispanic	Asian	Race 4	Race 5
Board of Directors	13					
QI Committee	7					
Clinical Team Leadership	6					

VI. SUMMARY OF CHANGES

Service Change Evaluations

As of July 2022, since the last review in 2018 there have been no fare structure changes because there are not fare requirements.

Program Specific Requirements

As of the date of this policy revision there have been no complaint, lawsuits or compliance issues.

Title VI Monitoring

The results of the ongoing monitoring of service standards as defined in the LRMHC can be obtained by contacting LRMHC. As of the date of this policy revision, there are no pending complaints, lawsuits and compliance issues.

Subrecipient Compliance

No sub-recipients.

Equity Analysis for Facility

LRMHC administrative office is located in an accessible building. The administrative offices are open to the public Monday through Friday, 8 AM to 5 PM. The location and accessibility of the offices has not changed.

Demographic Service Profile

Because LRMHC operates fewer than 50 buses in peak service, a demographic service profile was not prepared for this plan update.

VII. GRANTS, REVIEWS AND CERTIFICATIONS

Pending Applications for Financial Assistance

None at this time.

Civil Rights Compliance Reviews in the Past 3 Years

LRMHC has not been the subject of any such reviews.

Recent Annual Certifications and Assurances

With the submission of the most recent grant, LRMHC has filed the necessary certifications and assurances.

Contact

For additional information on the LRMHC Title VI Plan, or its efforts to comply with the Civil Rights Act of 1964 or Executive Order 13166 Improving Access to Services for Persons with Limited English Proficiency, please contact: Transportation Coordinator, LRMHC, 603-524-1100.

VIII. LANGUAGE ASSISTANCE PLAN

Improving Access for People with Limited English Proficiency (LEP)

In order to ensure meaningful access to programs and activities, LRMHC uses the information obtained in a Four Factor Analysis to determine the specific language services that are appropriate. This analysis helps LRMHC to determine if it communicates effectively with LEP persons and informs language access planning.

The Four Factor Analysis is a local assessment that considers:

1. The number or proportion of LEP persons eligible to be served or likely to be encountered by LRMHC;
2. The frequency with which LEP persons come into contact with LRMHC services and programs;
3. The nature and importance of LRMHC's services and programs in people's lives; and
4. The resources available to LRMHC for LEP outreach, as well as the costs associated with that outreach.

Factor 1 – Number of LEP Persons in Service Region

The first step in determining the appropriate components of a Language Assistance Plan is understanding the proportion of LEP persons who may encounter LRMHC services, their literacy skills in English and their native language, the location of their communities and neighborhoods and, more importantly, if any are underserved as a result of a language barrier.

To do this, LRMHC evaluated the level of English literacy and to what degree people in its service area speak a language other than English and what those languages are. Data for this review is derived from the United States Census and the American Community Survey.

Service Area Overview

LRMHC’s service area encompasses 24 municipalities in Belknap and southern Grafton Counties and is home to a population speaking approximately 21 different languages. Data is not available by town. The total population in the two counties is 154,823. It was reported that 9.9% of this population speak another language at home. According to the 2020 US Census data, the chart below shows this representation:

County	Population	Speak another language at home
Grafton County	91118	6.4%
Belknap County	63705	3.5%
Total	154823	9.9%

Factor 2 – Frequency of LEP Use

There are various places where LRMHC riders and members of the LEP population can come into contact with LRMHC services including the clinicians and the LRMHC Bus Service.

- Communication with LRMHC staff – clinicians and bus line;
- Printed outreach materials;
- Web-based outreach materials;
- Partnership Committee meetings

Factor 3 – The Importance of LRMHC Service to People’s Lives

Access to the services provided by LRMHC are critical to the lives of many in the service area. Many depend on LRMHC services for access to mental health and primary care. Riders eligible for service under the American’s with Disabilities Act (ADA) require service for the same reasons. Because of the essential nature of the services and the importance of these programs in the lives of many of the region’s residents, there is a need to ensure that language is not a barrier to access.

If limited English proficiency is a barrier to using these services, then the consequences for the individual could limit their access to obtain mental health services and primary health care. Critical information from LRMHC which can affect access is communicated via telephone by either support staff, clinician or bus driver.

Attachment 2: The title VI notice is posted on all LRMHC vehicles

Factor 4 – Resources and Costs for LEP Outreach

LRMHC will commit resources as needed to ensure access to its services and programs for LEP persons.

To date, the costs associated with these efforts fit within the LRMHC’s marketing and outreach budget. Costs are predominantly associated with translation services and material production.

Outcomes

LRMHC currently has extensive outreach and materials for the Language(s) speaking LEP population of the service area. We use additional services to assist other LEP populations regardless of the total population in the region. These include:

1. We utilize the Managed Care Organizations (MCOs) who assist with the majority of our patients
2. We use The Language Bank for translation.

LRMHC continues to increase LEP services by:

1. Recruiting more multilingual employees.
2. On-board announcements in different languages.

Oversight

Monitoring, Evaluating and Updating the Language Assistance Plan and Public Participation Process

The monitoring of the Language Assistance Plan will include:

- ◆ Annual reviews of regional census data for changing patterns of LEP populations;
- ◆ Update the policy every three years per State of NH DOT;
- ◆ Ongoing collaboration with regional partners;
- ◆ Ongoing review of Google Translate requests at LRMHC’s website

Training Employees Orientation/Annual Trainings

LRMHC conducts annual and new employee training on how to use LEP translation services that are available to the public and how to inform passengers of services and documents available for LEP populations.