B. SNAP agency survey instrument and document request



OMB Control No: XXXX-XXXX Expiration date: XX/XX/20XX

SNAP Language

December 6, 2022

Welcome to the SNAP Language Access Survey

- You may complete the survey all at once or save your responses and come back to it later.
- Please use the EXIT button at the bottom of the page when you want to exit your survey.
- Please use the buttons and links on each page to move through the survey. Using Enter or your browser's Back function may cause errors.
- If you'd like to review the questions before you start the survey, click here for a PDF version of the full survey.
- If you have trouble accessing the survey, or if you have questions, please contact us at [STUDYADDRESS]@mathematica-mpr.com or [study toll-free telephone number].

Public Burden Statement

This information is being collected to assist the Food and Nutrition Service to better understand the language landscapes in which Supplemental Nutrition Assistance Program (SNAP) and Nutrition Assistance Program (NAP) agencies operate and their associated limited English proficiency (LEP) policies and operations. This is a voluntary collection and FNS will use the information to improve access of SNAP to LEP individuals. This collection does not request any personally identifiable information under the Privacy Act of 1974. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-[xxxx]. The time required to complete this information collection is estimated to average 2.50 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22306 ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

ALL

Overview

Welcome to the SNAP Language Access Survey! This survey is about: (1) the requirements and guidance related to language access, and (2) how SNAP agencies ensure that individuals with limited English proficiency have meaningful access to SNAP. The survey asks about the policies and guidance your agency provides at the State or Territory-level. Although it has some general questions about how language access policies are implemented at the local level, the survey is **not** designed to capture the full depth and breadth of how language access policies are implemented across your State or Territory.

This survey is part of an exploratory study. The Food and Nutrition Service (FNS) is sponsoring the study to better understand how States and Territories have implemented the language access requirements for LEP individuals. Mathematica, an independent research and consulting company, is conducting the study on behalf of the USDA. This survey is not part of any FNS monitoring or auditing activities. The results of the survey will be used for research purposes only. Most of the information collected about each State and Territory in the survey will be publicly reported. The information will not be directly tied to any individual survey respondents, however, and information about the respondents will not be made public. After data collection is complete, the study team may follow-up with your State for if clarification is needed on any answers provided in the survey.

IF HVFIRSTPASSCOMPLETE =1 THEN DO NOT DISPLAY

It will take about two hours to finish this survey. The survey asks for copies of documents about your State or Territory's language access policies and procedures. Hereafter we refer to States or Territories as "States." Gathering the documents will take about 30 minutes and answering the survey questions will take up to two hours. To answer the questions in this survey, it may be useful to have your State's language access plan (if you have one), your States' civil rights procedures, and your State's SNAP training or administrative manual on hand.

Assigning Sections

One or more agency staff can complete the sections of the survey. The sections are:

- SNAP language access policy
- SNAP language access procedures
- Civil rights processes
- SNAP language access training
- SNAP E&T language access procedures
- D-SNAP language access procedures
- SNAP-Ed language access procedures

You may complete the main survey sections yourself or assign other agency staff to complete sections. In the introductory section, you will be able to provide contact information for the person within your agency who is best able to complete each of the other sections. We will send notifications to those people to ask them to complete their assigned sections.

ALL

Personally identifiable information (PII) will not be used to retrieve survey records or data.

For more information

If you have any questions or concerns about the survey, please contact the Mathematica study team at [fill study email address] or the FNS project officer, Eric Williams, at Eric.Williams@fns.usda.gov.

Thank you in advance for your help in completing this survey.

By proceeding to the next page of the survey, you are acknowledging your understanding of the study and consenting to participate.

SNAP Language Access Survey

Introduction Section

First, please answer some background questions about your SNAP State agency.

NOTE: I1A IS ONLY FOR THE HARD COPY. IF THE RESPONDENT SAYS YES THEN THEY SHOULD GO TO I1b. OTHERWISE THEY SHOULD GO TO I2.

| I1a. | Is you | State SNAP program county-administered? |
|-------|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | O | Yes1 |
| | 0 | No0 |
| IF AG | ENCY I | S ADMINISTERED AT THE COUNTY LEVEL |
| l1b. | proced | VERSION: Our records indicate that your State is county-administered.] Are your policies, lures, and operations on language access services consistent at the county level across tire State? |
| | O | Yes1 |
| | 0 | No0 |
| | | |
| ALL | | |
| 12. | | I be conducting an analysis of the language options offered in <u>State-sponsored SNAP</u> Please list the name of the SNAP app(s) available to SNAP participants. |
| | | apps may help participants review their current SNAP benefits balance, as well as apply benefits or renew their existing benefits. You do not need to list the Providers or EBT apps. |
| | | |

ALL

Next, please review the topics covered in each of the SNAP LEP survey sections in the table below and indicate who will respond to each section. You can indicate that you will respond to the questions in the section yourself or designate someone else to respond to these sections.

You may delegate only one person per section.

<u>Please designate only State-level or Territory-level SNAP staff to complete survey sections</u>. Please do not designate local office or provider staff; we are seeking a State-level perspective._

| Section 1: SNAP language | Topics covered • Understanding and implementing Title VI and FNS language access regulations and guidance | Examples of staff who might be able to respond SNAP director SNAP deputy director SNAP policy staff | I will respond to this section | I will designate someone else to respond to this section |
|--------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------------------------------|
| access policy | How the necessary language services are chosen Types of language services provided (oral and written) Process for hiring staff that speak other languages | SIVAF policy stall | | |
| Section 2: SNAP language access procedures | Presence of language access coordinators Problems and challenges encountered when working with LEP individuals How the LEP public is notified about language services Restrictions on the use of family, friends, and children as interpreters; and frequency of use Evaluation of the qualifications of interpreters, translators, and bilingual staff Length of time for getting translated documents and interpreters for LEP individuals Translation procedures | SNAP director SNAP deputy director Language access coordinator SNAP policy staff | ı O | 2 Q |
| Section 3: Civil Rights Processes | Number of civil rights complaints received about language access Number of findings of noncompliance made in evaluations and reviews Types of allegations Process of handling civil rights complaints | SNAP director SNAP deputy director Language access coordinator SNAP policy staff | Oı | 2 Q |
| Section 4: | • Training on language access procedures | SNAP director | \mathbf{C}_{1} | 2 Q |

| SNAP language access training | Topics covered offered to frontline staff • Procedures for informing staff of changes in language access requirements • Training available to bilingual staff and staff who provide interpretation services or translations | Examples of staff who might be able to respond SNAP deputy director Language access coordinator SNAP policy staff | I will respond to this section | I will designate someone else to respond to this section |
|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|
| Section 5: SNAP E&T language access procedures | Informing E&T providers of language access requirements Training for SNAP E&T providers on language access policies, plans, and procedures Determining languages used for SNAP E&T services How the LEP public is notified about SNAP E&T language services English as a Second Language (ESL) class offerings Exemptions for LEP individuals Procedures for placing LEP individuals into appropriate component | SNAP director SNAP E&T director SNAP E&T deputy director | 1 O | 2 Q |
| Section 6: D-SNAP language access procedures | Language services provided through D-SNAP Training for D-SNAP staff on language access policies, plans, and procedures Determining languages D-SNAP materials and services are provided in Whether qualified interpreters are available in reserve in the case of a disaster | SNAP directorD-SNAP director | C ₁ | 2 Q |
| Section 7: SNAP-Ed language access procedures | Informing SNAP-Ed contractors of language access requirements Training for SNAP-Ed contractors on language access policies, plans, and procedures Determining languages SNAP-Ed materials and services are provided in Language access service requirements for SNAP-Ed contractors | SNAP director SNAP-Ed director | O ₁ | 2 O |
| | | | | |

IF SECTION 1 = 2

SECTION 1: SNAP LANGUAGE ACCESS POLICY

| i5. | Please provide contact information for the person in your agency who will complete Section 1 on SNAP LEP policy. |
|-------|----------------------------------------------------------------------------------------------------------------------------------|
| | First Name: |
| | Last Name: |
| | Agency: |
| | Title: |
| | Email address: |
| | Telephone number: |
| | Additional telephone number: |
| IF SI | ECTION 2 = 2 |
| | TION 2: SNAP LANGUAGE ACCESS PROCEDURES |
| 16. | Please provide contact information for the person in your agency who will complete Section 2 on SNAP language access procedures. |
| | First Name: |
| | Last Name: |
| | Agency: |
| | Title: |
| | Email address: |
| | Telephone number: |
| | Additional telephone number: |
| | |

| IF S | SECTION 3 = 2 |
|------|-----------------------------------------------------------------------------------------------------------------------|
| SECT | TION 3: CIVIL RIGHTS PROCESSES |
| 17. | Please provide contact information for the person in your agency who will complete Section on Civil Rights Processes. |
| | First Name: |
| | Last Name: |
| | Agency: |
| | Title: |
| | Email address: |
| | Telephone number: |
| | Additional telephone number: |
| | |
| IF S | SECTION 4 = 2 |
| SEC1 | TION 4: SNAP LANGUAGE ACCESS TRAINING |
| 18. | Please provide contact information for the person in your agency who will complete Section on SNAP LEP training. |
| | First Name: |
| | Last Name: |
| | Agency: |
| | Title: |
| | Email address: |
| | Telephone number: |
| | Additional telephone number: |

| IF SI | ECTION 5 = 2 | | | |
|-------|------------------------------------------------------------------------------------------------------------------------|--|--|--|
| SECT | TION 5: SNAP E&T LANGUAGE ACCESS PROCEDURES | | | |
| 19. | Please provide contact information for the person in your agency who will complete Section on SNAP E&T LEP Procedures. | | | |
| | First Name: | | | |
| | Last Name: | | | |
| | Agency: | | | |
| | Title: | | | |
| | Email address: | | | |
| | Telephone number: | | | |
| | Additional telephone number: | | | |
| | | | | |
| IF SI | ECTION 6 = 2 | | | |
| SECT | ΓΙΟΝ 6: D-SNAP LANGUAGE ACCESS PROCEDURES | | | |
| I10. | Please provide contact information for the person in your agency who will complete Section 6 on D-SNAP LEP Procedures. | | | |
| | First Name: | | | |
| | Last Name: | | | |
| | Agency: | | | |
| | Title: | | | |
| | Email address: | | | |
| | Telephone number: | | | |

Additional telephone number:

| IF SECTION 7 = 2 | | | | |
|------------------|--|--|--|--|
|------------------|--|--|--|--|

SECTION 7: SNAP-ED LANGUAGE ACCESS PROCEDURES

I11. Please provide contact information for the person in your agency who will complete Section 7 on SNAP-Ed LEP Procedures.

| irst Name: |
|-----------------------------|
| ast Name: |
| gency: |
| itle: |
| mail address: |
| elephone number: |
| dditional telephone number: |
| |

SNAP LEP Survey

Section Status Page

The below table shows the person who will complete each section. To reassign a section to a different person, click the link in the Reassign column next to the person's name. The last column shows whether the section has been started, completed, or not started. To access a section that has not been completed, click the link in the Go to Section. If a section has been completed, the answers in that section cannot be changed.

| Survey Section | Person who will complete section | Reassign | Go to section | Section status |
|-----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Section 1: SNAP language access policy | Programmer: Fill SNAP State administrator name unless section is assigned to another person, then fill with that name. | Programmer: Link to make the reassignment. | Programmer: Link to the beginning of relevant section. | [Not started; Started; Completed] Programmer: If not started status as Not started; If partially completed status as Started; If the section is completed and submitted, status as Completed. If submitted, the respondent cannot access the section again. |
| Section 2: SNAP language access procedures | Programmer: Fill SNAP State administrator name unless section is assigned to another person, then fill with that name. | Programmer: Link to make the reassignment. | Programmer: Link to the beginning of relevant section. | [Not started; Started; Completed] Programmer: If not started status as Not started; If partially completed status as Started; If the section is completed and submitted, status as Completed. If submitted, the respondent cannot access the section again. |
| Section 3: Civil rights processes | Programmer: Fill SNAP administrator name unless section is assigned to another person, then fill with that name. | Programmer: Link to make the reassignment | Programmer: Link to the beginning of relevant section. | [Not started; Started; Completed] Programmer: If not started status as Not started; If partially completed status as Started; If the section is completed and submitted, status as Completed. If submitted, the respondent cannot access the section again. |

| Survey Section | Person who will complete section | Reassign | Go to section | Section status |
|------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Section 4: SNAP language access training | Programmer: Fill SNAP administrator name unless section is assigned to another person, then fill with that name. | Programmer: Link to make the reassignment. | Programmer: Link to the beginning of relevant section. | [Not started; Started; Completed] Programmer: If not started status as Not started; If partially completed status as Started; If the section is completed and submitted, status as Completed. If submitted, the respondent cannot access the section again. |
| Section 5: SNAP E&T language access procedures | Programmer: Fill SNAP administrator name unless section is assigned to another person, then fill with that name. | Programmer: Link to make the reassignment. | Programmer: Link to the beginning of relevant section. | [Not started; Started; Completed] Programmer: If not started status as Not started; If partially completed status as Started; If the section is completed and submitted, status as Completed. If submitted, the respondent cannot access the section again. |
| Section 6: D-SNAP language access procedures | Programmer: Fill SNAP administrator name unless section is assigned to another person, then fill with that name. | Programmer: Link to make the reassignment. | Programmer: Link to the beginning of relevant section. | [Not started; Started; Completed] Programmer: If not started status as Not started; If partially completed status as Started; If the section is completed and submitted, status as Completed. If submitted, the respondent cannot access the section again. |
| Section 7: SNAP-Ed language access procedures | Programmer: Fill SNAP administrator name unless section is assigned to another person, then fill with that name. | Programmer: Link to make the reassignment. | Programmer: Link to the beginning of relevant section. | [Not started; Started; Completed] Programmer: If not started status as Not started; If partially completed status as Started; If the section is completed and submitted, status as Completed. If submitted, the respondent cannot access the section again. |

If you'd like to review the questions in your section before you start, click $\underline{\text{here}}$ for a PDF version of the full survey.

If you have any questions about this survey or would like to complete it over the telephone, please call us at [fill toll-free number].

SECTION 1. SNAP LANGUAGE ACCESS POLICY

The following questions ask about how your SNAP State agency determines the language assistance services it provides, including whether your agency conducts the Federal four-factor analysis of language needs. [IF COUNTY-ADMINSTERED: You should answer all questions about what is generally done in your State.]

What is the four-factor analysis? The four-factor analysis is a Federal standard used to determine the right language assistance services to ensure LEP individuals have meaningful access to an agency's program and activities. The US Department of Agriculture instructs State agencies to assess the LEP needs of the population they serve and determine the language access services required by balancing four factors (see page 70777, section IV: https://www.federalregister.gov/documents/2014/11/28/2014-27960/guidance-to-federal-financial-assistance-recipients-regarding-the-title-vi-prohibition-against):

- 1. The number or proportion of LEP individuals eligible to be served or likely to be encountered within the area serviced by the recipient.
- 2. The frequency with which LEP individuals come in contact with the program or activity.
- 3. The nature and importance of the program, activity, or service to people's lives.
- 4. Resources available to your SNAP State agency and the costs of language services.

A1. Has your SNAP State agency ever conducted the four-factor analysis?

[DEFINITION OF FOUR-FACTOR ANALYSIS WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM]

| O | Yes | 1 |
|---|----------------------------------------------------------------------------|-----------------|
| O | No | 0 |
| O | IF I1b = 0: There is variation in the four-factor analysis being conducted | across counties |
| | within our State | 98 |

The following questions are about your SNAP State agency's language access plan.

What is a language access plan? Agencies and departmental offices should develop a written language access plan. The plan gives them a framework for their provision of timely and reasonable language assistance and for eliminating or reducing LEP as a barrier to accessing USDA programs and activities. It outlines how they will accomplish these goals.

A2. Does your SNAP State agency have a language access plan?

[DEFINITION OF LANGUAGE ACCESS PLAN WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM]

| \mathbf{O} | Yes | . 1 |
|--------------|-------------------------------------------------------------------|-----|
| O | No | . 0 |
| C | IF I1b = 0: Some counties within our State have a language access | |
| | plan, but others do not | .98 |

| $\Lambda \gamma$ | _1 |
|------------------|----|
| A | |

A3. Which of the following elements are included in the language access plan? IDEFINITION OF LANGUAGE ACCESS PLAN WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] \bigcirc IF I1 = 0: There is variation in the elements included in the language access plan across counties within our State......98 Select one per row YES NO a. Needs and capacity assessment [Hover over text: Each agency or Departmental office will have in place mechanisms to assess, on a regular and consistent basis, the LEP status and language assistance needs of current and potential customers and contacts, as well as mechanisms to assess the agency or office's capacity to 1 **O** 0 0 meet these needs according to the elements of this plan. These mechanisms should employ the four-factor analysis described in the DOJ LEP Guidance Document.] b. Interpreter language assistance services [Hover over text: Arrangements for the provision of oral language assistance, including interpretation assistance by 1 O 00 qualified interpreters, in response to the needs of LEP customers, in both face-to face and telephone encounters.] c. Written translations [Hover over text: Each agency or Departmental office will produce vital documents, including website information, in languages other than English where a significant number or percentage of the customers served or 1 O 00 eligible to be served has LEP. These written materials may include paper and electronic information such as publications, notices, correspondence, and signs d. Policies and procedures related to each of the language access plan elements [Hover over text: Each agency or Departmental office will have in place specific 00 written policies and procedures related to each of the plan elements and 1 **O** designated staff that will be responsible for implementing activities related to these policies.1 e. Notification of the availability of free language services [Hover over text: Each agency or Departmental office will proactively inform LEP customers of the availability of free language assistance services through both oral and written 1 O O 0 notice, in the primary languages spoken by a significant number of customers and potential customers.]

Staff training [Hover over text: Each agency or Departmental office will train front-

Departmental office will institute procedures to assess the accessibility and quality

interpretation, and contractual services for LEP customers. Based on the results of this assessment, the LEP Plan, agency procedures and directives will be

1 **Q**

1 O

1 **O**

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o O

line and managerial staff on the policies and procedures of its language

of language assistance services, including translation of vital documents.

g. Assessing accessibility and quality [Hover over text: Each agency or

assistance activities.]

h. Other (specify)

revised on an annual basis.]

The following questions are about what your SNAP State agency does in response to:

- Title VI of the Civil Rights Act of 1964 (42 USC § 2000d at 7 CFR 15) which prohibits discrimination based on race, color, and national origin in programs and activities receiving Federal financial assistance and USDA implementing regulations at 7 CFR 15.1 et seq.
- SNAP Bilingual Regulations 7 CFR 272.4(b) et seq., and
- USDA Guidance to Federal Financial Assistance Recipients Regarding the <u>Title VI</u>
 Prohibition Against National Origin Discrimination Affecting Persons With Limited English Proficiency (79 F.R. No. 299, p. 70771-70784, November 28, 2014).

[DEFINITONS OF UNDERLINED TEXT WILL DISPLAY:

7 CFR part 15: Guidance provided by the U.S. Department of Agriculture for recipients of Federal financial assistance on Title VI as it affects LEP individuals.

SNAP Bilingual Regulations: Based on the estimated total number of low-income households in a project area which speak the same non-English language (a single-language minority), the State agency shall provide bilingual program information and certification materials, and staff or interpreters as needed.]

| \neg LL | Α | L | L | | | |
|-----------|---|---|---|--|--|--|
|-----------|---|---|---|--|--|--|

A4. Does your SNAP State agency have a Language Access Working Group?

A Language Access Working Group is a group that is responsible for identifying barriers to meaningful language access and developing and implementing strategies and solutions to overcome these barriers.

| O | Yes | 1 |
|---|-----|---|
| O | No | C |

The following questions ask about your State's specific language access regulations and guidance.

| ^ | |
|---|--|
| А | |

A5. Does your State have language access regulations or policies that go beyond USDA implementing regulations for Title VI, the SNAP bilingual regulations, and the USDA LEP Guidance?

Going beyond these Federal language access regulations means that your State may have additional or more stringent written regulations or policies than the federal guidance.

[DEFINITION OF TITLE VI, SNAP BILINGUAL REGULATIONS WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM]

| \mathbf{O} | Yes | . 1 |
|--------------|-----|-----|
| O | No | .0 |

The next series of questions are about how the SNAP State agency sets policies.

| ALL | | | |
|------------|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| 46. | Langu | oes your SNAP State agency determine the mix of language services age assistance services may include telephone interpreter lines, contilability of bilingual staff assistance, etc.? | |
| | Sele | ct all that apply | |
| | | Reliance on outcome of four-factor analysis | 1 |
| | | Guidance from other State agencies | 2 |
| | | Guidance from the U.S. Department of Agriculture | 3 |
| | | Guidance from other Federal agencies (e.g., Department of Justice) | 4 |
| | | State policy | 5 |
| | | Other SNAP State agency | 6 |
| | | Community feedback | 7 |
| | | Other (specify) | 99 |
| | | | |
| | • | SNAP State agency does not determine the mix of language services | |
| ALL | | | |
| A7. | | oes your SNAP State agency collect community feedback when upda age access procedures? | ting current |
| | Sele | ct all that apply | |
| | | Meet with community leaders | 1 |
| | | Meet with community organizations | 2 |
| | | Collect feedback (e.g., digital, electronic, letters, phone calls) from the community | 3 |
| | | Analyze data collected by community organizations | 4 |
| | | Other (specify) | 99 |
| | O | SNAP State agency does not collect community feedback when updating language access procedures | 0 |

| ALL | |
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A8. Which of the following sources of information does your SNAP State agency use to track how often it encounters LEP individuals?

| Selec | ct all that apply | |
|-------|---------------------------------------------------------------------------|----|
| | Application data | 1 |
| | Eligibility data | 2 |
| | Case management data | 3 |
| | Customer service survey | 4 |
| | Call center data | 5 |
| | Data from other access points | 6 |
| | Data on applicants requesting language access services | 7 |
| | Other (specify) | 99 |
| | | |
| 0 | SNAP State agency does not track how often they encounter LEP individuals | 0 |

The next questions ask about the language assistance services that your SNAP State agency offer to ensure meaningful access for applicants and participants with limited English proficiency (hereafter referred to as LEP individuals). LEP individuals do not speak English as their primary language and have a limited ability to read, speak, write, or understand it. We will first ask about your State's oral language services

PROGRAMMER, INCLUDE THIS HOVER DEFINITON OF "MEANINGFUL ACCESS:" Meaningful access refers to the provision of reasonable language assistance services that enable LEP individuals to have substantially equal participation in and access to the benefits of a federal financial assistance program or activity. These services are meaningful when they are provided at a time and place that avoids the effective denial of the service, benefit, or right at issue or the imposition of an undue burden on or delay in important rights, benefits, or services to the LEP individual.

| • | | |
|---|-----|--|
| L | A I | |
| | ٦L | |

| A9. | What o | ral language services does your SNAP State agency offer? |
|--------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | all that apply | |
| | | Interpreter service (e.g., telephone, Internet/video, in-person)1 |
| | | Bilingual speakers on staff [Hover definition of "Bilingual speakers on staff": Bilingual staff are staff who can converse fluently with individuals needing language assistance in their primary (non-English) language. These staff may or may not have certifications.] |
| | | Interpreters on staff [Hover definition of "Interpreters on staff": Interpreters are professionally trained and certified individuals who communicate from one (source language) language to another (target language) orally. Interpreter services could be offered by telephone, internet or video calling, or in-person. Agencies may have interpreters on staff or utilize contracted interpreters.] |
| | | Contracted interpreters [Include hover definition of interpreters]4 |
| | | Language bank or dedicated pool of interpreters [Include hover definition of interpreters]5 |
| | | Other (specify)99 |
| | 0 | IF I1b = 0: There is variation in the oral language services across counties within our State |
| | O | SNAP State agency does not offer any oral language services0 |
| A9 = 2 | 2 OR 3 | |
| A10. | | oes your SNAP State agency determine the languages that bilingual and interpreter staff o speak in your offices? |
| | Select a | all that apply |
| | | By assessing the presence of language groups in the service area using federal data1 |
| | | By assessing the presence of language groups in the service area using State and local data2 |
| | | By consulting community and/or faith-based organizations that serve and work with LEP communities in the service area3 |
| | 0 | IF I1b = 0: This activity is delegated to each county and, therefore, there is variation across counties within our State98 |
| | | Other method (please describe)99 |
| | | |

| ALL | | | | | | | |
|-------|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--|--|--|--|
| A11. | | hiring case workers and other frontline staff how important is it that ge other than English? | they speak a | | | | |
| | O | Not at all important | 1 | | | | |
| | O | Slightly important | 2 | | | | |
| | O | Important | 3 | | | | |
| | O | Fairly important | 4 | | | | |
| | O | Very important | 5 | | | | |
| The n | ext ques | tions are about translating documents. | | | | | |
| ALL | | | | | | | |
| A12. | Which | of the following vital documents does your SNAP State agency tran | slate? | | | | |
| | informa | over text for "vital documents": Written material, either hard copy or elect tion critical for accessing a program or activity or required by law. Examp tions, and notices of rights] | | | | | |
| | Seled | ct all that apply | | | | | |
| | | Consent forms | 1 | | | | |
| | | Complaint forms | 2 | | | | |
| | | Notices of rights | 3 | | | | |
| | | Applications to participate in programs or activities | 4 | | | | |
| | | SNAP application form | 5 | | | | |
| | | Notices to households (e.g. notices of rights, notices of denial, loss or decrease in benefits or services) | 6 | | | | |
| | | Other (specify) | 99 | | | | |
| | | | | | | | |
| | O | SNAP State agency does not translate any vital documents | 0 | | | | |
| A12 : | = 1,2,3,4, | 5,6,99 | | | | | |
| A12a. | - | d your SNAP State agency decide to translate the following docume | ents: [FILL | | | | |
| | Select | Select all that apply | | | | | |
| | | Members of the public could not access or participate in the program if the document was not translated | 1 | | | | |
| | | A member of the public could be terminated from this program service if they are unable to complete or understand the document | 2 | | | | |
| | | A member of the public could suffer significant financial, physical, or other harm if they are unable to understand the document | 3 | | | | |

| | | The U.S. Department of Agriculture has provided guidance that the documents be translated | 4 |
|--------|----------|---------------------------------------------------------------------------------------------------------------------------------------|----|
| | | Other SNAP agencies have recommended that the documents are translated | 5 |
| | | The community provided feedback that they needed the document translated | 6 |
| | | Other (specify) | 99 |
| | | | |
| | | | |
| A12 = | 1,2,3,4, | 5,6,99 | |
| FILL T | HE FOL | LOWING LANGUAGES IN THE LIST: [CUSTOMIZED LIST] | |
| A13. | | anguages do you translate the vital documents into? Please only ges. You may also select less than five languages if applicable to | |
| | | Spanish | 1 |
| | | Chinese | 2 |
| | | French | 3 |
| | | Tagalog | 4 |
| | | Vietnamese | 5 |
| | | Korean | 6 |
| | | German | 7 |
| | | Russian | 8 |
| | | Italian | 9 |
| | | Other(specify) | 99 |
| | | | 7 |

PROGRAMMER: Do not allow the selection of more than five languages.

| ^ | 12 | | 1 | \sim | .3. | 4 | | | \sim | |
|---------------|----|---|---|--------|-----|----|----------|----|--------|---|
| Δ | | _ | 1 | ٠, | ~ | / | h | h | u | ı |
| $\overline{}$ | ᄮᅩ | _ | _ | | . പ | ╼. | . J. | ·U | . J | - |

A14. How does your State determine into which languages to provide translated <u>vital documents</u>?

[Hover-over text for "vital documents": Written material, either hard copy or electronic, that contains information critical for accessing a program or activity or required by law. Examples are consent forms, applications, and notices of rights]

Select all that apply

| | By assessing the presence of language groups in the service area using federal data | .1 |
|---|---------------------------------------------------------------------------------------------------------------------------|-----|
| | By assessing the presence of language groups in the service area using State and local data | 2 |
| | By consulting community and/or faith-based organizations that serve and work with LEP communities in the service area | 3 |
| C | IF I1b = 0: This activity is delegated to each county and, therefore, there is variation across counties within our State | 98 |
| | Other method (please describe) | .99 |
| | | |

The next questions ask about other languages services your SNAP State agency offers.

| ALL | - | | | |
|------|-------------------|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|
| A15. | What o | other language assistance se | vices does your SNAP State | e agency offer? |
| | Select | all that apply | | |
| | | Recorded voice services with voicemail, customer service no | | |
| | | Multilingual online services (e. account management platform | | |
| | O | None of the above | | 0 |
| IF A | A15=1OR 2 | 2 THEN DISPLAY CORRESPO | NDING COLUMN IN GRID | |
| FIL | L THE FOL | LOWING LANGUAGES IN TH | E LIST: [CUSTOMIZED LIST] | |
| 1 | | ES IN STEM BASED ON ANSV | • | |
| A16. | | anguage options does your S h and non-English options, a | | |
| | Please applica | only select the <u>top five</u> languable. | uages. You may also select l | ess than five languages if |
| | | | SELECT ALL T | HAT APPLY |
| | | | Recorded voice services with English and non-English options(e.g., voicemail, customer service numbers, other telephone services) | Multilingual online services (e.g., State website, online applications, account management platforms) |
| a. | Spanish | | 4 🗆 | 5 🗖 |
| b. | Chinese | | 4 🗖 | 5 🗖 |
| C. | French | | 4 🗖 | 5 🗖 |
| d. | Tagalog | | 4 🗖 | 5 🗖 |
| e. | Vietname | se | 4 🗆 | 5 🗖 |
| f. | Korean | | 4 🗆 | 5 🗖 |
| g. | German | | 4 🗖 | 5 🗖 |
| h. | Russian | | 4 🗆 | 5 🗖 |
| i. | Italian | | 4 🗆 | 5 🗖 |
| j. | Portugues | se | 4 🗖 | 5 🗖 |
| k. | Other (spe | ecify) | 4 🗖 | 5 🗖 |

PROGRAMMER: Do not allow the selection of more than five languages.

The next set of questions is about your procedures when handling special situations.

| ALL | | |
|------|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A17. | | s your SNAP State agency's policy for frontline staff if they encounter LEP individuals e only proficient in a language not commonly used in the service area? |
| | Seled | ct all that apply |
| | | Use an interpreter service (e.g., telephone, internet/video, in-person)1 |
| | | Use the individuals' family members or friends to help provide language services |
| | | Attempt to provide language services in a language other than the primary language of the LEP individual (e.g., try communicating in English or a dialect or language similar to the individual's primary language) |
| | | Use picture aides4 |
| | | Use of I Speak language identification cards or posters5 |
| | | Use a tool like Google, Siri, Alexa, etc. to translate6 |
| | | Use bilingual staff who speak these languages7 |
| | | Other (specify)99 |
| | | |
| | O | SNAP State agency does not have a policy for this situation0 |
| | | |
| | | |
| ALL | | |
| A18. | mostly | of the following services does your SNAP State agency provide for languages that are spoken and not written? For example, some dialects of Chinese or some Native can languages. |
| | Seled | ct all that apply |
| | | Use an interpreter service (e.g., telephone, Internet/video, in-person)1 |
| | | Use bilingual staff who speak these languages2 |
| | | Contract interpreters who speak these languages3 |
| | | Use these individuals' family members or friends as interpreters4 |
| | | Other (specify)99 |
| | | |
| | 0 | SNAP State agency does not provide any services listed above0 |

| ALL | | | | | | | | |
|------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|
| A19. | How d | oes your SNAP State agency provide language services in unexpected situations? | | | | | | |
| | runnin comm individ | An example of an unexpected situation would be a benefit issuance system outage, running out of translated materials, encountering a LEP individual speaking a less common language for which you do not have materials or services, or having a LEP individual who frontline staff cannot communicate with visit the office without an appointment. | | | | | | |
| | Sele | ct all that apply | | | | | | |
| | | Use an interpreter service (e.g., telephone, Internet/video, in-person)1 | | | | | | |
| | | Use the individuals' family members or friends to help provide language services2 | | | | | | |
| | | Identify the language service that is needed and reschedule with individual when service is available3 | | | | | | |
| | | Attempt to provide language services in a language other than the language of the LEP individual (e.g., try communicating in English or a dialect or language similar to the individual's primary language)4 | | | | | | |
| | | Use picture aides5 | | | | | | |
| | | Use of I Speak language identification cards or posters6 | | | | | | |
| | | Use a tool like Google, Siri, Alexa, etc. to translate7 | | | | | | |
| | | Use bilingual staff who speak these languages8 | | | | | | |
| | | Other (specify)99 | | | | | | |
| | O | SNAP State agency does not provide language services in unexpected situations | | | | | | |
| ALL | | | | | | | | |
| A20. | | our SNAP State agency use multiple translations for languages that have regional on for example, Puerto Rican Spanish and Mexican Spanish? | | | | | | |
| | O | Yes1 | | | | | | |
| | O | No0 | | | | | | |
| | C | IF I1b = 0: This activity is delegated to each county and, therefore, there is variation across counties within our State | | | | | | |
| ALL | | | | | | | | |
| A21. | | our SNAP State agency share language assistance resources with SNAP agencies ir States or other agencies within your State? | | | | | | |
| | Sele | ct all that apply | | | | | | |
| | П | Yes, we share resources with SNAP agencies in other States 1 | | | | | | |

| ALL | | |
|-------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A22. | | additional information about <u>Title VI</u> and the Federal language access regulations and acce could FNS provide to be helpful to your SNAP State agency? |
| | TERM. which p | IITION OF TITLE VI WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED THE DEFINTION IS: <i>Title VI of the Civil Rights Act of 1964 (42 USC § 2000d at 7 CFR 15)</i> prohibits discrimination based on race, color, and national origin in programs and activities ang Federal financial assistance and USDA implementing regulations at <i>7 CFR 15.1</i> et seq] |
| | Seled | ct all that apply |
| | | Tools for implementing Title VI and Federal regulations and guidance1 |
| | | Examples of best practices in how other SNAP agencies implement Title VI and Federal regulations and guidance (this may include examples of documents, tools, training, etc.) |
| | | Information on how to implement Title VI and Federal regulations and guidance for SNAP E&T, SNAP-Ed, and D-SNAP3 |
| | | More detailed guidance on implementing Title VI and Federal regulations4 |
| | | Other (specify)99 |
| | • | No other information about Title VI and Federal language access regulations and guidance is needed |
| ALL | | |
| A23. | the res | nuch do you agree or disagree with the following statement? My SNAP State agency has cources to implement language access plans, policies, and procedures to meet <u>Federations and guidance</u> . |
| | Select | one only |
| | O | Strongly agree1 |
| | O | Agree2 |
| | O | Disagree3 |
| | O | Strongly disagree4 |
| | | |

 \square Yes, we share resources with other agencies within the State.....2

Mathematica 26

Select one only

| | • | Strongly agree1 | | | | |
|------|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| | O | Agree | | | | |
| | O | Disagree3 | | | | |
| | O | Strongly disagree4 | | | | |
| ALL | | | | | | |
| A25. | agency | uch do you agree or disagree with the following statement? My State's SNAP State provides the same level of language assistance services to LEP individuals regardles ther they live in rural or urban areas. | | | | |
| | Select | one only | | | | |
| | O | Strongly agree1 | | | | |
| | O | Agree2 | | | | |
| | O | Disagree3 | | | | |
| | O | Strongly disagree4 | | | | |
| ALL | | | | | | |
| A26. | What additional resources do your SNAP State agency need to ensure LEP individuals have meaningful access to SNAP? | | | | | |
| | - | IITION OF MEANINGFUL ACCESS WILL DISPLAY WHEN RESPONDENT HOVERS OVER RLINED TERM] | | | | |
| | Sele | ct all that apply | | | | |
| | | Increased funding1 | | | | |
| | | More staffing2 | | | | |
| | | Translated materials3 | | | | |
| | | Support for agency staff training4 | | | | |
| | | External resources (e.g., community partners with language access services)5 | | | | |
| | | Translator and interpreter services (e.g., telephone, Internet/video, inperson)6 | | | | |
| | | Support for oversight and quality assurance7 | | | | |
| | O | No additional resources needed0 | | | | |
| | | Other (specify)99 | | | | |
| | | | | | | |
| | | | | | | |
| ALL | | | | | | |
| A27. | | our SNAP State agency regularly communicate with FNS about language access ements? | | | | |
| | • | Yes1 | | | | |

| | <u>C</u> | No0 | _ |
|------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| ALL | | | |
| A28. | | much do you agree or disagree with the following statement? My SNAP State agency res enough <u>technical assistance</u> from FNS about language access requirements. | ′ |
| | Techn or pro | nical assistance is the process of providing focused support to an organization with oblem. | a n |
| | Select | one only | |
| | 0 | Strongly agree1 | |
| | 0 | Agree2 | |
| | 0 | Disagree3 | |
| | O | Strongly disagree4 | |
| ALL | | | |
| A29. | | much do you agree or disagree with the following statement? My SNAP State agency res enough communications from FNS on language access requirements. | / |
| | Select | one only | |
| | 0 | Strongly agree1 | |
| | 0 | Agree2 | |
| | 0 | Disagree3 | |
| | O | Strongly disagree4 | |
| ALL | | | |
| A30. | | your SNAP State agency share language assistance resources, language access pla guidance with other SNAP agencies? | ans, |
| | O | Yes1 | |
| | 0 | No0 | |
| ALL | | | |
| A31. | | nat extent do the SNAP State agency staff understand <u>Title VI</u> and the Federal langua s regulations and guidance? | ıge |
| | [DEFIN TERM] | NITION OF TITLE VI WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLIN] | ED |
| | Select | one only | |
| | O | Not at all1 | |
| | O | A little2 | |
| | O | Somewhat3 | |
| | • | A great deal4 | |

| A2 = | L | | | | | |
|------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|------------------|--|--|--|
| A32. | Would | you share your most recent <u>language access plan</u> with us? | | | | |
| | [DEFINITION OF LANGUAGE ACCESS PLAN WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | | |
| | Sele | ct all that apply | | | | |
| | | It is available publicly on our website | 1 | | | |
| | | It is not on our website, but I can send it via email | 2 | | | |
| | | It is not on our website, but I can upload it to a secure site | 3 | | | |
| | | No, I cannot share the language access plan | 4 | | | |
| | O | Don't know | d | | | |
| A32= | :1 | | | | | |
| A33. | Would | you please share the URL(s) where we can find the language acces | ss plan? | | | |
| | | | | | | |
| | (S | FRING 1000) | | | | |
| | | | | | | |
| ALL | | | | | | |
| A34. | | ı have State guidance or policy documents related to language acc with us? | ess that you cou | | | |
| | Sele | ct all that apply | | | | |
| | | These documents are available publicly on our website | 1 | | | |
| | | These documents are not on our website, but I can send them via email | 2 | | | |
| | | These documents are not on our website, but I can upload them to a secure site | 3 | | | |
| | | No, I cannot share the State guidance or policy documents | 4 | | | |
| | O | No, we do not have any State guidance or policy documents | 5 | | | |
| | O | Don't know | d | | | |
| A34= | :1 | | | | | |
| A35. | | you please share the URL(s) where we can find the State guidance I to language access? | or policy docum | | | |
| | | | | | | |
| | (S | FRING 1000) | | | | |

| ALL | |
|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A_END. | Thank you for completing this section. If you have more information you would like to share about SNAP language access policy in your State or Territory, please share it below. |
| | (STRING 1000) |

SECTION 2: SNAP LANGUAGE ACCESS PROCEDURES

The next questions are about how your SNAP State agency implements policies and procedures that comply with Title VI and Federal regulations and guidance that deal with language access for persons with LEP. [IF COUNTY-ADMINSTERED: You should answer all questions about what is generally done in your State.]

| ALL | | | |
|------|---------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| B1. | Does | our SNAP State agency have a designated language access coordinator? | |
| | | R OVER TEXT: The language access coordinator's job is to coordinate and monitor the pentation of the State agency's language access plan, policies, and procedures.] | |
| | O | Yes1 | |
| | 0 | No0 | |
| | | | |
| IF B | 1 = 1 | | |
| B2. | Is the language access coordinator responsible for developing a language access plan? | | |
| | | IITION OF LANGUAGE ACCESS PLAN WILL DISPLAY WHEN RESPONDENT HOVERS UNDERLINED TERM] | |
| | • | Yes1 | |
| | • | No0 | |

| ALL | | | | | |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| B3. | When working with <u>sub-recipients</u> does your SNAP State agency incorporate any of the following requirements in your contract or other similar types of agreements, such as an memorandum of understanding (MOU), to ensure that you can meet the federal language acces requirements? [DEFINITION OF LANGUAGE ACCESS PLAN WILL APPEAR WHEN RESPONDENT HOVERS OVE UNDERLINED TERM] | | | | |
| | | | | | |
| | Select all that apply | | | | |
| | | Having a language access plan1 | | | |
| | | Appointing a language access coordinator2 | | | |
| | | Some other requirement | | | |
| | O | IF I1b = 0: Working with sub-recipients is delegated to each county and, therefore, there is variation across counties within our State98 | | | |
| | • | Not applicable – we do not work with subrecipients97 | | | |
| | 0 | No, we do not put any language access requirements in sub-recipient contracts0 | | | |
| | ALL | | | | |
| B4. | How do staff in your State conduct outreach to the LEP communities about SNAP services? | | | | |
| | Select all that apply | | | | |
| | | Posting signs in intake areas and other entry points1 | | | |
| | | Distributing outreach documents about SNAP services2 | | | |
| | | Working with community-based organizations and other stakeholders | | | |

stations about the available SNAP services and how to get them.....6

☐ Providing notices on non-English–language radio and television

Delivering presentations and/or notices to organizations in the community (e.g., schools, religious institutions, senior centers,

| | O | Staff do not conduct outreach to the LEP communities about SNAP services0 | | | |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| ALL | | | | | |
| B5. | How do frontline staff in your State inform LEP communities about the language assistance services (e.g., interpreters or translated materials) that are provided at no cost to individuals. Frontline staff are staff who work directly, both verbally and electronically, with applicants are participants. These staff may be, but are not limited to, bilingual workers. Case managers are one example, but there are also other frontline staff who work directly with applicants and participants. Select all that apply | | | | |
| | | | | | |
| | | | | | |
| | | Posting signs in intake areas and other entry points1 | | | |
| | | Stating in outreach documents that language access services are available from the agency2 | | | |
| | | Working with community-based organizations and other stakeholders to inform LEP individuals of the language access services3 | | | |
| | | Using a telephone voice mail menu4 | | | |
| | | Including notices in local newspapers in languages other than English5 | | | |
| | | Providing notices on non-English–language radio and television stations about the available language assistance services and how to get them6 | | | |
| | | Delivering presentations and/or notices to organizations in the community (e.g., schools, religious institutions, senior centers, community centers) | | | |
| | | Other (specify)99 | | | |
| | O | Frontline staff do not inform LEP communities about the language assistance services that are provided at no cost0 | | | |
| ALL | | | | | |
| В6. | How does your State determine whether <u>frontline staff</u> are providing the appropriate languag assistance services to LEP applicants and participants? | | | | |
| | [DEFINITION OF FRONTLINE STAFF WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | |
| | Seled | ct all that apply | | | |
| | | Evaluations conducted by leaders of frontline staff1 | | | |
| | | Conducts quality assurance of records kept by frontline staff2 | | | |
| | | Feedback from LEP applicants/participants3 | | | |
| | | Frontline staff self-evaluations4 | | | |
| | | Frontline staff peer evaluations5 | | | |
| | O | Other (specify)99 | | | |
| | | | | | |

| | | Frontline staff have not determined if the State is providing the appropriate language assistance services | 0 | |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|
| ALL | | | | |
| В7. | | re <u>frontline staff</u> notified of an existing customer's needs for written age assistance services? | and/or verbal | |
| | | NITION OF FRONTLINE STAFF WILL DISPLAY WHEN RESPONDENT I RLINED TERM] | HOVERS OVER | |
| | Sele | ct all that apply | | |
| | | Provided to the frontline staff via email or telephone | 1 | |
| | | Recorded in the eligibility and/or case management system(s) | 2 | |
| | | Other (specify) | 99 | |
| | O | Frontline staff are not notified | 0 | |
| ALL | | | | |
| B8. | Does your SNAP State agency have a written procedure for how <u>frontline staff</u> determine whether an applicant or participant requires language assistance? | | | |
| | - | NITION OF FRONTLINE STAFF WILL APPEAR WHEN RESPONDENT H RLINED TERM] | HOVERS OVER | |
| | Sele | ct one only | | |
| | O | Yes, the SNAP State agency provides a written procedure to frontline staff | 1 | |
| | O | No, the SNAP State agency does not provide written procedures to frontline staff | 2 | |
| | O | IF I1b = 0: There is variation in these written procedures across counties within our State | 98 | |
| ALL | | | | |
| В9. | | your SNAP State agency have a written procedure for how <u>frontline</u> and participants | | |
| | - | NITION OF FRONTLINE STAFF WILL DISPLAY WHEN RESPONDENT I RLINED TERM] | HOVERS OVER | |
| | O | Yes | 1 | |
| | • | No | 0 | |

| ALL | | |
|---------------------|-------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 39a. | | oes your SNAP State agency <u>record</u> the primary language spoken and/or the languag ance provided at the point of contact with LEP individuals? |
| | Seled | et all that apply |
| | | This information is recorded in the eligibility and/or case management system in a standardized data field (such as a drop-down menu to select primary language spoken) |
| | | This information is recorded in the eligibility and/or case management system in an open notes field2 |
| | | This information is shared via email or phone3 |
| | | Other (specify)99 |
| | | |
| | O | There is no standardized method to record language service needs0 |
| | | |
| | | |
| ALL | | |
| ALL 310 . | | our SNAP State agency formally track requests <u>for translated materials</u> in languages routinely encounter? |
| | do not By "fo | |
| | do not By "for docum | routinely encounter? mally track" we are referring to a system or database that your State may have to |
| | do not By "for docum | routinely encounter? mally track" we are referring to a system or database that your State may have to ent these requests. |
| | do not By "for docum | routinely encounter? mally track" we are referring to a system or database that your State may have to ent these requests. Yes |
| | do not By "for docum O | routinely encounter? mally track" we are referring to a system or database that your State may have to ent these requests. Yes |
| 310. | do not By "for docum O O How of | routinely encounter? mally track" we are referring to a system or database that your State may have to ent these requests. Yes |
| B10= | do not By "for docum O O How or langua | routinely encounter? rmally track" we are referring to a system or database that your State may have to ent these requests. Yes |
| B10= | do not By "for docum O O How or langua | routinely encounter? rmally track" we are referring to a system or database that your State may have to ent these requests. Yes |
| B10= | do not By "for docum O O I How or langua | routinely encounter? rmally track" we are referring to a system or database that your State may have to ent these requests. Yes |
| B10= | do not By "for docum O O I How or langua Select | routinely encounter? rmally track" we are referring to a system or database that your State may have to ent these requests. Yes |
| B10= | do not By "for docum" O O How or langua Select O O | routinely encounter? rmally track" we are referring to a system or database that your State may have to ent these requests. Yes |

| ALL | | | |
|-------|--------|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| B11. | | vour SNAP State agency formally track requests for oral interpreter o not routinely encounter? | services in langua |
| | | rmally track" we are referring to a system or database that your Sta ent these requests. | te may have to |
| | O | Yes | 1 |
| | O | No | 0 |
| B11= | :1 | | |
| B11a. | | ften does your SNAP State agency respond to requests for oral inte ages you do not serve on a regular basis? Your best estimate is fine | |
| | Seled | ct one only | |
| | O | At least once every week | 1 |
| | O | At least once every month (but less than every week) | 2 |
| | O | At least once every quarter (but less than every month) | 3 |
| | O | At least once every year (but less than every quarter) | 4 |
| | 0 | Never | 0 |
| ALL | | | |
| B12. | What o | challenges does your SNAP State agency have when working with L | .EP individuals? |
| | Select | all that apply | |
| | | Lack of funding | 1 |
| | | Not enough bilingual staff | 2 |
| | | Not have enough translated materials | 3 |
| | | There is not enough support for training | 4 |
| | | Not enough interpreters onsite to provide services | 5 |
| | | Not enough bilingual/multilingual staff onsite to provide services | 6 |
| | | Do not have access to interpreter services (e.g., telephone, Internet/video, in-person) | 7 |
| | | Not enough support for oversight and quality assurance | 8 |
| | | Other (specify) | 99 |
| | O | SNAP State agency has not experienced any challenges working with | 0 |

| ALL | | | | | | |
|------|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--|--|--|
| B13. | What o | do <u>frontline staff</u> do when they are unable to communicate with an L | .EP individual? | | | |
| | - | [DEFINITION OF FRONTLINE STAFF WILL APPEAR WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | |
| | Seled | ct all that apply | | | | |
| | | Use an interpreter service (e.g., telephone, Internet/video, in person) | 1 | | | |
| | | Use the individuals' family members or friends to help provide language services | 2 | | | |
| | | Identify the language service that is needed and reschedule with individual when service is available | 3 | | | |
| | | Attempt to provide language services in a language other than the primary language of the LEP individual (e.g., try communicating in English or a dialect or language similar to the individual's primary language) | 4 | | | |
| | | Use picture aides | 5 | | | |
| | | Use a tool like Google, Siri, Alexa, etc. to translate | 6 | | | |
| | | Use bilingual staff who speak these languages | 7 | | | |
| | | Other (specify) | 99 | | | |
| | | | | | | |
| | 0 | There is no policy for what frontline staff should do if they are unable to communicate with an LEP individual | | | | |
| | | | | | | |
| ALL | | | | | | |
| B14. | | your SNAP State agency allow exemptions to LEP individuals (e.g., tements) if there are no frontline staff who are proficient in their prim | | | | |
| | O | Yes | 1 | | | |

O No......0

| ALL | | |
|------------------|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| B15. | | an LEP participants share their feedback or concerns about the agency's language ance services or lack thereof with SNAP State agencies? |
| | Seled | ct all that apply |
| | | Feedback section on website1 |
| | | Feedback form, available at local SNAP offices2 |
| | | Frontline staff submit feedback they receive from individuals3 |
| | | Feedback section at the end of the application4 |
| | | Through surveys5 |
| | | Call the toll-free number or email6 |
| | | Other (specify)99 |
| | | |
| | O | SNAP State agency does not collect feedback0 |
| The ne State. | ext serie | s of questions focus on the <u>translation, interpretation,</u> and <u>bilingual services</u> in your |
| [DEFIN | NITONS | OF UNDERLINED TEXT WILL DISPLAY: |
| | | he replacement of written text from one language (source language) into an equivalent nother language (target language). |
| langua | iges. <i>Inte</i> | The process by which the spoken word is used when transferring meaning between erpretation involves listening to a communication in one language (source language) and g it to another language (target language) while retaining the same meaning. |
| | | rices: Bilingual services involve providing staff who can converse fluently with LEP eir primary language.] |
| ALL | | |
| B16. | | eral, how does your SNAP State agency translate content, materials, or services that ed online (e.g. websites, online automated applications, EBT platforms etc.)? |
| | Seled | ct all that apply |
| | | Automated translation software1 |
| | | FNS-provided translations of essential documents2 |
| | | Qualified human translators3 |
| | | Other (specify)99 |
| | | |
| | | |

| B17. What language assistance resources are available to help LEP individuals access SNAP websites, web portals, or online applications? Select all that apply [Automated translation software is used for all online services | ALL | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Select all that apply [Automated translation software is used for all online services | DISP | LAY OP | TIONS 1 AND 2 IF B16=1 | | | |
| [Automated translation software is used for all online services | B17. | | • • | | | |
| [Automated translation software is used for some online services | | Seled | ct all that apply | | | |
| Written translations of vital documents [Hover over definition: Written material, either hard copy or electronic, that contains information critical for accessing a program or activity or required by law. Examples are consent forms, applications, and notices of rights.] | | | [Automated translation software is used for all online services1] | | | |
| material, either hard copy or electronic, that contains information critical for accessing a program or activity or required by law. Examples are consent forms, applications, and notices of rights.] | | | [Automated translation software is used for some online services2] | | | |
| oral interpretation, free of cost | | | material, either hard copy or electronic, that contains information critical for accessing a program or activity or required by law. | | | |
| SNAP State agency does not offer language assistance resources to help LEP individuals access SNAP websites, web portals, or online applications | | | | | | |
| help LEP individuals access SNAP websites, web portals, or online applications | | | Other (specify)99 | | | |
| help LEP individuals access SNAP websites, web portals, or online applications | | | | | | |
| ALL B18. How does the SNAP State agency evaluate the qualifications of interpreters and translate during the hiring or contracting process? [Hover-over text: Interpreters are staff who translate from one language to another orally. Interpreters could be offered by telephone, internet or video calling, or in-person. Translators are staff who translate written material from English to another language and vice verselect all that apply Academic degree | | O | help LEP individuals access SNAP websites, web portals, or online | | | |
| [Hover-over text: Interpreters are staff who translate from one language to another orally. Interpreters could be offered by telephone, internet or video calling, or in-person. Translators are staff who translate written material from English to another language and vice verselect all that apply Academic degree | | How does the SNAP State agency evaluate the qualifications of <u>interpreters</u> and <u>translators</u> | | | | |
| Select all that apply 1 □ Academic degree 1 □ Certification 2 □ Work experience 3 □ Interview 4 □ Language test or assessment 5 □ Training attendance records 6 | | [Hover- | over text: Interpreters are staff who translate from one language to another orally. Interpre | | | |
| □ Academic degree 1 □ Certification 2 □ Work experience 3 □ Interview 4 □ Language test or assessment 5 □ Training attendance records 6 | | Transla | ators are staff who translate written material from English to another language and vice ve | | | |
| □ Certification | | Seled | ct all that apply | | | |
| □ Work experience | | | Academic degree1 | | | |
| □ Interview | | | Certification2 | | | |
| □ Language test or assessment | | | Work experience3 | | | |
| ☐ Training attendance records6 | | | Interview4 | | | |
| • | | | Language test or assessment5 | | | |
| ☐ Other (specify)99 | | | Training attendance records6 | | | |
| | | | Other (specify)99 | | | |
| | | | | | | |

| Λ | 1 | |
|---|---|--|
| | | |

B19. How does the SNAP State agency evaluate the qualifications of <u>bilingual staff</u> during the hiring process?

[Hover-over text: Bilingual staff are staff who can converse fluently with LEP persons in their primary (non-English) language.]

Select all that apply

| | Academic degree | 1 |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| | Certification | 2 |
| | Work experience | 3 |
| | Interview | 4 |
| | Language test or assessment | 5 |
| | Training attendance records | 6 |
| | Other (specify) | 99 |
| | | |
| O | SNAP State agency does not evaluate the qualifications of bilingual staff during the hiring process | 0 |
| C | IF I1b = 1: There is variation in how the qualifications of bilingual staff are evaluated during the hiring process across counties within our State | 98 |

| ALL | | | | |
|------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|--|--|
| B20. | How does the SNAP State agency evaluate the qualifications of an advocacy organization's translators and interpreters? | | | |
| | | IITION OF INTERPRETER AND TRANSLATOR WILL APPEAR WHEN RESPONDENT RS OVER UNDERLINED TERM] | | |
| | Seled | ct all that apply | | |
| | | Academic degree(s) of organization's staff1 | | |
| | | Certification(s) of organization's staff2 | | |
| | | Work experience(s) of organization's staff3 | | |
| | | Interview(s) with organization's staff4 | | |
| | | Language test(s) or assessment(s) of organization's staff5 | | |
| | | Recommendation from organization leadership6 | | |
| | | Training attendance records7 | | |
| | | Other (specify)99 | | |
| | | | | |
| | O | SNAP State agency does not evaluate the qualifications of an | | |
| | | advocacy organization's translators and interpreters0 | | |
| | | | | |
| | | | | |
| ALL | | | | |
| B21. | How d | o <u>frontline staff</u> in your State communicate verbally with LEP individuals? | | |
| | | IITION OF FRONTLINE STAFF WILL DISPLAY WHEN RESPONDENT HOVERS OVER RLINED TERM] | | |
| | Seled | ct all that apply | | |
| | | State always has bilingual staff available in person and by telephone1 | | |
| | | State uses on-staff interpreters2 | | |
| | | State uses contracted interpreters3 | | |
| | | State uses interpreters from advocacy organizations4 | | |
| | | Staff use a telephonic interpreter service5 | | |
| | | Family members or friends6 | | |
| | | Other (specify)99 | | |
| | | | | |

O There are no services that frontline staff offer to verbally communicate

with LEP individuals0

| ALL | | | | |
|---------------------|-------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------|--|
| B22. | | ong does it take to get translated documents to LEP individua only spoken in the State or locality? | lls if their language i | |
| | Select | one only | | |
| | • | 1 day or less | 1 | |
| | • | 2 to 3 days | 2 | |
| | • | 4 to 6 days | 3 | |
| | • | 1 to 2 weeks | 4 | |
| | • | 3 to 4 weeks | 5 | |
| | 0 | 5 weeks or more | 6 | |
| | 0 | Our State does not offer translated documents to LEP individual | s0 | |
| | | | | |
| | | | | |
| ALL | | | | |
| 323. | How long does it take to get <u>interpreters</u> for LEP individuals if their language is commonly spoken in the State or locality? | | | |
| | | NITION OF INTERPRETER WILL APPEAR WHEN RESPONDEN | T LIOVEDS OVED | |
| | UNDE | RLINED TERM] | I HOVERS OVER | |
| | | | I HOVERS OVER | |
| | | RLINED TERM] | | |
| | Select | RLINED TERM] one only | 1 | |
| | Select | RLINED TERM] one only 1 day or less | 1 | |
| | Select O | RLINED TERM] one only 1 day or less2 to 3 days | 1 2 3 | |
| | Select O | RLINED TERM] one only 1 day or less | 1 2 3 | |
| | Select O O | RLINED TERM] one only 1 day or less | 1234 | |
| | Select O O O | RLINED TERM] one only 1 day or less | 12345 | |
| | Select O O O | RLINED TERM] one only 1 day or less 2 to 3 days 4 to 6 days 1 to 2 weeks 3 to 4 weeks 5 weeks or more | 12345 | |
| ALL | Select O O O | RLINED TERM] one only 1 day or less 2 to 3 days 4 to 6 days 1 to 2 weeks 3 to 4 weeks 5 weeks or more | 12345 | |
| ALL B24 . | Select O O O O O O O O O O O | RLINED TERM] one only 1 day or less 2 to 3 days 4 to 6 days 1 to 2 weeks 3 to 4 weeks 5 weeks or more | 124560 | |
| | Select O O O O O O O O O O O O O O O O O O O | PRLINED TERM] one only 1 day or less | 124560 | |
| | Select O O O O O O O O O O O O O O O O O O O | PRLINED TERM] one only 1 day or less | 1 | |
| | Select O O O O O O O O O Select | PRLINED TERM] one only 1 day or less | 1 | |

| | • | Our State does not offer translated documents to LEP individuals | 0 | |
|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--|
| | | | | |
| | | | | |
| ALL | | | | |
| B25. | | ong does it take to get <u>interpreters</u> for LEP individuals if their langu untered in the State or locality? | age is rarely | |
| | | NITION OF INTERPRETER WILL APPEAR WHEN RESPONDENT HOV RLINED TERM] | ERS OVER | |
| | Select | t one only | | |
| | O | 1 day or less | 1 | |
| | O | 2 to 3 days | 2 | |
| | O | 4 to 6 days | 3 | |
| | O | 1 to 2 weeks | 4 | |
| | O | 3 to 4 weeks | 5 | |
| | O | 5 weeks or more | 6 | |
| | 0 | Our State does not offer interpreters for LEP individuals | 0 | |
| ALL B26. | If an individual with limited English proficiency chooses to use their family or friend as an interpreter, does the SNAP State agency require the individual to sign a waiver of their right | | | |
| | | nterpreter services (e.g., telephone, Internet/video, in-person)? | 3 | |
| | | NITION OF INTERPRETER WILL APPEAR WHEN RESPONDENT HOV RLINED TERM] | ERS OVER | |
| | O | Yes | 1 | |
| | O | No | 0 | |
| | | | | |
| ALL | | | | |
| | | | | |
| B27. | When | does the SNAP State agency permit the use of family and friends as | s interpreters? | |
| B27. | [DEFIN | does the SNAP State agency permit the use of family and friends as NITION OF INTERPRETER WILL APPEAR WHEN RESPONDENT HOVERLINED TERM] | - | |
| B27. | [DEFINUNDE | NITION OF INTERPRETER WILL APPEAR WHEN RESPONDENT HOV | - | |
| В27. | [DEFINUNDE | NITION OF INTERPRETER WILL APPEAR WHEN RESPONDENT HOVERLINED TERM] Sect all that apply | ERS OVER | |
| B27. | [DEFINUNDE | NITION OF INTERPRETER WILL APPEAR WHEN RESPONDENT HOVERLINED TERM] Sect all that apply For routine matters (such as the location of an office or hours of an agency) | ERS OVER | |
| B27. | [DEFIN UNDER Selec | NITION OF INTERPRETER WILL APPEAR WHEN RESPONDENT HOVERLINED TERM] Pect all that apply For routine matters (such as the location of an office or hours of an agency) During an emergency when no other interpretation is available | ERS OVER | |
| В27. | [DEFIN UNDEI Selec | NITION OF INTERPRETER WILL APPEAR WHEN RESPONDENT HOVERLINED TERM] Pect all that apply For routine matters (such as the location of an office or hours of an agency) During an emergency when no other interpretation is available | ERS OVER123 | |

| | | During all interactions with the LEP individual6 |
|------|--------|---------------------------------------------------------------------------------------------------|
| | • | Never0 |
| ALL | | |
| ALL | | |
| B28. | When | does the SNAP State agency permit the use of children as interpreters? |
| | | IITION OF INTERPRETER WILL APPEAR WHEN RESPONDENT HOVERS OVER RLINED TERM] |
| | Sele | ct all that apply |
| | | For routine matters (such as the location of an office or hours of an agency)1 |
| | | During an emergency when no other interpretation is available2 |
| | | After an LEP individual has filled out a wavier to use an interpreter of their choosing |
| | | When filling out an application4 |
| | | During an interview5 |
| | | During all interactions with the LEP individual6 |
| | O | Never0 |
| ALL | | |
| B29. | How o | ften do <u>frontline staff</u> use family and friends of LEP individuals as <u>interpreters</u> ? |
| | [DEFIN | IITION OF INTERPRETER WILL APPEAR WHEN RESPONDENT HOVERS OVER RLINED TERM] |
| | | IITION OF FRONTLINE STAFF WILL APPEAR WHEN RESPONDENT HOVERS OVER RLINED TERM] |
| | Select | one only |
| | 0 | Never1 |
| | 0 | Rarely2 |
| | • | Sometimes3 |
| | O | Usually4 |
| | O | Always5 |

| B30. | How o | ften do frontline staff use children of LEP individuals as interpreters? | | | | |
|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| | [DEFINITION OF INTERPRETER WILL APPEAR WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | | |
| | | IITION OF FRONTLINE STAFF WILL APPEAR WHEN RESPONDENT HOVERS OVER RLINED TERM] | | | | |
| | Select | one only | | | | |
| | O | Never1 | | | | |
| | O | Rarely2 | | | | |
| | • | Sometimes3 | | | | |
| | • | Usually4 | | | | |
| | O | Always5 | | | | |
| ALL | | | | | | |
| | | ext questions are about <u>translation</u> procedures. When does the SNAP State agency en nanges made to English documents are translated into the languages commonly used ants? | | | | |
| | that ch applica [DEFII | nanges made to English documents are translated into the languages commonly used | | | | |
| ALL B31. | that ch applica [DEFIN UNDER | nanges made to English documents are translated into the languages commonly used ants? NITION OF TRANSLATION WILL DISPLAY WHEN RESPONDENT HOVERS OVER | | | | |
| | that ch applica [DEFIN UNDER | nanges made to English documents are translated into the languages commonly used ants? NITION OF TRANSLATION WILL DISPLAY WHEN RESPONDENT HOVERS OVER RLINED TERM] | | | | |
| | that chapplication [DEFIN UNDER | nanges made to English documents are translated into the languages commonly used ants? NITION OF TRANSLATION WILL DISPLAY WHEN RESPONDENT HOVERS OVER RLINED TERM] ot all that apply SNAP State agency updates translations when English vital documents are updated [Hover over definition: Written material, either hard copy or electronic, that contains information critical for accessing a program or activity or required by law. Examples are consent forms, | | | | |
| | that chapplication application | nanges made to English documents are translated into the languages commonly used ants? NITION OF TRANSLATION WILL DISPLAY WHEN RESPONDENT HOVERS OVER RLINED TERM] ot all that apply SNAP State agency updates translations when English vital documents are updated [Hover over definition: Written material, either hard copy or electronic, that contains information critical for accessing a program or activity or required by law. Examples are consent forms, applications, and notices of rights] | | | | |

Our State does not offer translated documents to LEP individuals0

| ALL | | | | | | |
|------|--------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| B32. | How does the SNAP State agency ensure <u>translation</u> accuracy and cultural competency? | | | | | |
| | - | IITION OF TRANSLATION WILL APPEAR WHEN RESPONDENT HOVERS OVER RLINED TERM] | | | | |
| | Seled | ct all that apply | | | | |
| | | We check on the U.S. Department of Agriculture, FNS website for existing translated terminology1 | | | | |
| | | One staff person translates the document and another staff person reviews2 | | | | |
| | | Documents are reviewed to ensure that the language level is consistent in documents | | | | |
| | | Documents are reviewed by a translator or staff person who is fluent in the language to ensure they use <u>culturally sensitive terminology</u> [Hover definition of "culturally sensitive terminology": Each society is different and has different norms; so the translations should reflect these norms to appeal to the specific group.] | | | | |
| | | Other (specify)99 | | | | |
| | O | Our State does not offer translated documents to LEP individuals0 | | | | |
| ALL | | | | | | |
| 333. | | n have informational materials on how the SNAP State agency implements language spolicies and procedures (e.g. training manuals or policy memos) you could share w | | | | |
| | Select | one only | | | | |
| | | These materials are available publicly on our website1 | | | | |
| | | These materials are not on our website, but I can send them via email2 | | | | |
| | | These materials are not on our website, but I can upload them to a secure site | | | | |

O No, I cannot share the informational materials on how the SNAP State

O No, we do not have any informational materials on how the SNAP

agency operates language access policies and procedures......4

| B33 = | 1 |
|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| B34. | Would you please share the URL(s) where we can find the informational materials on how the SNAP State agency operates language access policies and procedures? |
| | |
| | (STRING 1000) |
| | |
| | |
| ALL | |
| B_END | Thank you for completing this section. If you have more information you would like to share about SNAP language access procedures in your State or Territory, please share it below. |
| | |
| | |

SECTION 3: CIVIL RIGHTS PROCESSES

The next series of questions asks about your State's civil rights processes. [IF COUNTY-ADMINSTERED: You should answer all questions about what is generally done in your State.]

| C1. | | our SNAP State agency offer any types of language access services as a result on tourt decision, civil rights complaint investigation, or compliance review? |
|-----|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | O | Yes1 |
| | • | No0 |
| ALL | | |
| C2. | | oes your SNAP State agency inform people they can file complaints about langua s services directly with the U.S. Department of Agriculture (USDA)? |
| | Seled | ct all that apply |
| | | Application forms include FNS-approved nondiscrimination statement1 |
| | | Complaint forms (paper/online) include FNS-approved nondiscrimination statement |
| | | Staff share this information verbally with individuals3 |
| | | Notices or signs are posted in the office4 |
| | | USDA And Justice for All, or an FNS-approved substitute, is in the office5 |
| | | SNAP State websites show this information6 |
| | | This information is included in a telephone voice mail menu7 |
| | | Other (specify)99 |
| | | |
| | O | The SNAP State agency does not do this |
| ALL | | |
| C3. | | rour SNAP State agency have a process for handling civil rights complaints relate ge access and national origin discrimination that is approved by the FNS Civil Rig on? |
| | O | Yes1 |
| | O | No0 |

| ALL | | | | | | | |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|--------------------------|--|--|--|--|
| C4. | In the past 5 years, has your SNAP State agency had any findings of noncompliance for Civil Rights language access requirements? These can be a result of a FNS Management Evaluatio or a FNS Civil Rights Compliance Review. | | | | | | |
| | O | Yes | 1 | | | | |
| | O | No | 0 | | | | |
| C4=2 | 1 | | | | | | |
| C5. | | nany findings of noncompliance for Civil Rights language ac se of a FNS Management Evaluation or a FNS Civil Rights C | | | | | |
| | Select | one only | | | | | |
| | • | 1-2 | 1 | | | | |
| | • | 3-5 | 2 | | | | |
| | O | 5-10 | 3 | | | | |
| | O | More than 10 | 4 | | | | |
| C4=: | 1 | | | | | | |
| C6. | | ur SNAP State agency take the necessary corrective action mpliance? | s to resolve findings of | | | | |
| | • | Yes | 1 | | | | |
| | 0 | No | 0 | | | | |
| ALL | | | | | | | |
| C7. | Did yo | ur State agency receive any civil rights complaints in the paically about language access? | ast 12 months that were | | | | |
| | • | Yes | 1 | | | | |
| | O | No | 0 | | | | |

| C7 = 3 | 1 | | | | | |
|--------|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| C8. | In the past 12 months, how many civil rights complaints did your SNAP State agency receive because it did not provide language access services? | | | | | |
| | | NUMBER | | | | |
| | <u>C</u> | Don't knowd | | | | |
| | | | | | | |
| C7=1 | | | | | | |
| C9. | What t | ypes of allegations were raised in the civil rights complaints received over the past 12 s? | | | | |
| | Please | only include information on complaints specific to language access services. | | | | |
| | Seled | ct all that apply | | | | |
| | | Failed to provide a <u>qualified interpreter</u> or translated materials [Hover over definition: A qualified interpreter is a highly trained individual who mediates spoken communication between people speaking different languages without adding, omitting, or distorting meaning or editorializing. A qualified interpreter is competent to provide interpreter services at a level of fluency, comprehension, impartiality, and confidentiality appropriate to the specific nature, type, and purpose of the information at issue.] | | | | |
| | | Online application system was not available in the most commonly used languages besides English2 | | | | |
| | | Recipient was not notified of rights3 | | | | |
| | | Discrimination against a member of a State-specific protected class4 | | | | |
| | | Reasonable steps not being taken to provide meaningful access to SNAP5 | | | | |
| | | Incident with staff member(s)6 | | | | |
| | | Denial of needed benefits and services7 | | | | |
| | | Delay in service delivery8 | | | | |
| | | Wrong services were provided9 | | | | |
| | | Ineffective services were provided10 | | | | |
| | | Voicemail menus on customer service lines are not accessible to persons with LEP10 | | | | |
| | | Other (specify)99 | | | | |

| C7=1 | | | | | | | |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| C10. | Did your SNAP State agency inform the FNS Civil Rights Division about all these civil rights complaints on language access before it initiated an investigation of the allegations? | | | | | | |
| | Please only include information on complaints specific to language access services | | | | | | |
| | Sele | ct all that apply | | | | | |
| | | Yes, we notified the FNS Civil Rights Division of all complaints1 | | | | | |
| | | We notified the FNS Civil Rights Divisions of some complaints2 | | | | | |
| | | No, we did not notify the FNS Civil Rights Division about any of the complaints3 | | | | | |
| C8 > | 0, DOES | NOT EQUAL DK | | | | | |
| PREF | ILL NUN | MBER FROM C8 | | | | | |
| | | NUMBER | | | | | |
| 011 | 0 | Don't knowd | | | | | |
| | | S NOT EQUAL DK | | | | | |
| PRE | FILL NUN | MBER FROM C11 | | | | | |
| C12. | | corrective actions has your SNAP State agency taken in response to the [NUMBER FF omplaints related to language access services that were determined noncompliant? | | | | | |
| | Sele | ct all that apply | | | | | |
| | | Provided written notice to local agencies or sub-recipients of areas of noncompliance and required actions to correct the situation1 | | | | | |
| | | Negotiated with local agencies or sub-recipients to achieve compliance2 | | | | | |
| | | Submitted a Report of Findings of Noncompliance to the FNS Regional Civil Rights Officer if corrective action has not been taken within 60 days of finding3 | | | | | |
| | | Other (specify)99 | | | | | |
| | O | No corrective actions have been taken0 | | | | | |

| ALL | | |
|------|--------|----------------------------------------------------------------------------------------------------------------------------------------------|
| C13. | | u have State guidance or policy documents related to submitting and/or addressing civ complaints that you could share with us? |
| | Sele | ct all that apply |
| | | These documents are available publicly on our website1 |
| | | These documents are not on our website, but I can send them via email2 |
| | | These documents are not on our website, but I can upload them to a secure site |
| | O | No, I cannot share them4 |
| | • | No, we do not have any5 |
| | O | Don't knowd |
| C13 | = 1 | |
| C14. | | you please share the URL(s) where we can find the State guidance or policy document to submitting and/or addressing civil rights complaints? |
| | (STRIN | IG 100) |
| ALL | | |
| C15. | | have any informational materials you provide to SNAP participants on submitting civicomplaints that you could share with us? |
| | Sele | ct all that apply |
| | | These materials are available publicly on our website1 |
| | | These materials are not on our website, but I can send them via email2 |
| | | These materials are not on our website, but I can upload them to a secure site |
| | O | No, I cannot share any informational materials we provide to SNAP participants on submitting civil rights complaints4 |
| | O | No, we do not have any informational materials we provide to SNAP participants on submitting civil rights complaints5 |
| | O | Don't knowd |
| C15 | = 1 | |
| C16. | | you please share the URL(s) where we can find informational materials you provide to participants on submitting civil rights complaints? |
| | | |

| ALL | |
|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C_END. | Thank you for completing this section. If you have more information you would like to sha about civil rights processes in your State or Territory, please share it in the box below. |
| | (STRING 1000) |

SECTION 4: SNAP LANGUAGE ACCESS TRAINING

This next series of questions reviews the training on language access services provided to staff. [IF COUNTY-ADMINSTERED: You should answer all questions about what is generally done in your State.]

| ALL | | | | | | |
|-----|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------------|--|--|--|
| D1. | Do <u>fro</u> | ntline staff receive an annual training on civil rights? | | | | |
| | | ITION OF FRONTLINE STAFF WILL DISPLAY WHEN RESPONDEN RLINED TERM] | T HOVERS OVER | | | |
| | O | Yes | 1 | | | |
| | • | No | 0 | | | |
| | | | | | | |
| ALL | | | | | | |
| | TEXT "TI NING" IF | HAT GOES BEYOND THE TRAINING RECEIVED IN THE ANNUAL (D1 = 1 | CIVIL RIGHTS | | | |
| D2. | | ntline staff receive other types of training on language access pro If the training received in the annual civil rights training]? | ocedures [that goes | | | |
| | | ITION OF FRONTLINE STAFF WILL DISPLAY WHEN RESPONDEN RLINED TERM] | T HOVERS OVER | | | |
| | O | Yes | 1 | | | |
| | O | No | 0 | | | |
| ALL | | | | | | |
| D3. | How would your SNAP State agency inform <u>frontline staff</u> of these changes in language acc policies, plans, and procedures? | | | | | |
| | - | ITION OF FRONTLINE STAFF WILL DISPLAY WHEN RESPONDEN RLINED TERM] | T HOVERS OVER | | | |
| | Seled | ct all that apply | | | | |
| | | Virtual meetings | 1 | | | |
| | | In-person meetings | 2 | | | |
| | | Program office or department's intranet site | 3 | | | |
| | | SNAP external website | 4 | | | |
| | | Email updates | 5 | | | |
| | | Operational memos | 6 | | | |
| | | Phone calls | 7 | | | |
| | | Other (specify) | 99 | | | |
| | | | | | | |

| ALL | | | | | |
|------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--|--|
| D4. | | oes your SNAP State agency receive feedback from <u>frontline staff</u> a nenting language access policies, plans and procedures? | bout challenges | | |
| | - | IITION OF FRONTLINE STAFF WILL DISPLAY WHEN RESPONDENT RLINED TERM] | HOVERS OVER | | |
| | Sele | ct all that apply | | | |
| | | Frontline staff complete surveys about their experience | 1 | | |
| | | $\hfill \square$ Supervisors observe frontline staff interactions with LEP individuals | | | |
| | | Through group discussions or meetings with frontline staff | 3 | | |
| | | Frontline staff have one-on-one conversations with supervisors | 4 | | |
| | | Frontline staff provide ad hoc feedback | 5 | | |
| | | Other (specify) | 99 | | |
| | | | | | |
| | O | No feedback is collected from frontline staff | 0 | | |
| IF D | 4 DOES I | NOT EQUAL 0 | | | |
| D5. | How d | oes the SNAP State agency train <u>frontline staff</u> on its language acco dures? | ess policies, plan | | |
| | | IITION OF FRONTLINE STAFF WILL DISPLAY WHEN RESPONDENT RLINED TERM] | HOVERS OVER | | |
| | Sele | ct all that apply | | | |
| | | Online trainings | 1 | | |
| | | Conferences | 2 | | |
| | | Group in-person trainings | 3 | | |
| | | Group virtual trainings | 4 | | |
| | | One-on-one virtual trainings | 5 | | |
| | | On-the-job training [Hover over text: On-the-job training typically involves a combination of observing others and hands-on experience under the supervision of a training manager, co-worker, or outsourced professional trainer] | 6 | | |

□ Other (specify)......99

| ALI | _ | | | | | |
|----------------|---------------------------|-------------------------------------------------------------------------------------------------|------------|------------|---------------------|--------------------------------------------------------------|
| D6. | | kinds of training does your SNAP State aq e interpretation services or translations? | | rovide f | or <u>bilingu</u> | al staff or staff who |
| | | [DEFINITION OF BILINGUAL STAFF WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | |
| | Seled | ct all that apply | | | | |
| | | Professional training courses for bilinguals | s, interpr | eters, an | d translato | rs1 |
| | | Training on language access policy and pr | ocedure |) | | 2 |
| | | Having a third-party evaluator test the staff | f's langu | age skills | S | 3 |
| | | Other (specify) | | | | 99 |
| | | | | | | |
| A. I. I | | | | | | |
| ALI | | | | | _ | |
| D7. | Are <u>fro</u> service | <u>ontline staff</u> trained on how to use or arra es? | inge for | the follo | wing type | es of interpreter |
| | | IITION OF FRONTLINE STAFF WILL DISPI RLINED TERM] | LAY WF | IEN RES | PONDEN ⁻ | T HOVERS OVER |
| | | | | | Select | one per row |
| | | | | YES | NO | Not Applicable, my State does not have this service |
| _ | Talamban | - : | | 1 Q | C ₀ | Service |
| a. | • | e interpreters | | 1 O | O ₀ | 9 |
| b. | | ed or video interpreters | | 1 O | O ₀ | 9 |
| C. | in-person | interpreters | | 1 9 | 0 🔾 | J |
| A.I. I | | | | | | |
| ALI | | | | | | |
| D8. | | a have training materials for <u>frontline stat</u> with us (this may include training manua | | | | |
| | - | IITION OF FRONTLINE STAFF WILL DISPI RLINED TERM] | LAY WF | IEN RES | PONDEN ⁻ | T HOVERS OVER |
| | Seled | ct all that apply | | | | |
| | | These materials are available publicly on o | our webs | site | | 1 |
| | | These materials are not on our website, bu | ut I can s | send ther | n via emai | l2 |
| | | These materials are not on our website, bu secure site | | | | 3 |
| | O | No, I cannot share any training materials for access obligations | | | | |
| | O | No, we do not have any training materials a language access obligations | | | | 5 |

| | O Don't knowd |
|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| D8 = 1 | |
| D9. | Would you please share the URL(s) where we can find the training materials for frontline staff on language access obligations? |
| | (STRING 1000) |
| ALL | |
| D_END | Thank you for completing this section. If you have more information you would like to share about SNAP language access training in your State or Territory, please share it in the box below. |
| | |
| | (STRING 1000) |

SECTION 5. SNAP E&T LANGUAGE ACCESS PROCEDURES

The next set of questions are about language services provided in SNAP E&T programs. You should answer all questions about what is generally done in your State.

| ALL | | | | | |
|------------------|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|--|--|
| E1. | How does your SNAP State agency inform <u>SNAP E&T providers</u> of Title VI and their language access requirements? | | | | |
| | compo | E&T providers are organizations or agencies who provide SNAP Enents to eligible SNAP participants. SNAP E&T providers could be subrecipient organization or agency staff (such as a Departmente). | e SNAP State agend | | |
| | Sele | ct all that apply | | | |
| | | Virtual meetings | 1 | | |
| | | In-person meetings | 2 | | |
| | | SNAP internal website | 3 | | |
| | | SNAP external website | 4 | | |
| | | Email updates | 5 | | |
| | | Updates sent by mail (e.g., brochures and memos) | 6 | | |
| | | Phone calls | 7 | | |
| | | Other (specify) | 99 | | |
| | | | | | |
| | O | SNAP State agency does not have a way to inform SNAP E&T providers of Title VI and language access requirements | 0 | | |
| | | | | | |
| A11 | | | | | |
| ALL 2. | Door | ha CNAD State agamey provide training to CNAD FOT providere of | vout Title \/I and the | | |
| :Z . | Does the SNAP State agency provide training to <u>SNAP E&T providers</u> about Title VI and their language access requirements? | | | | |
| | | IITION OF SNAP E&T PROVIDERS WILL DISPLAY WHEN RESPONI RLINED TERM] | DENT HOVERS OVE | | |
| | O | Yes, the SNAP State agency provides the training | 1 | | |
| | | | | | |
| | O | No, there is no training provided | 0 | | |
| | | No, there is no training provided Policy or guidance gives local SNAP offices or E&T providers flexibilit in how their staff are trained about Title VI and their language access requirements | у | | |

| E3. | Do <u>SNAP E&T providers</u> offer services in a language other than English? | | | | |
|-----|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--|--|
| | - | IITION OF SNAP E&T PROVIDERS WILL DISPLAY WHEN RESPONDE RLINED TERM] | NT HOVERS OVER | | |
| | O | Yes | 1 | | |
| | 0 | No | 0 | | |
| ALL | | | | | |
| E4. | How do | oes your SNAP State agency determine in which languages to provides? | le SNAP E&T | | |
| | Seled | ct all that apply | | | |
| | | By assessing the presence of language groups in the service area using federal data | 1 | | |
| | | By assessing the presence of language groups in the service area using State and local data | 2 | | |
| | | By consulting community and/or faith-based organizations that serve and work with LEP communities in the service area | 3 | | |
| | O | Policy or guidance gives local SNAP offices or E&T providers flexibility in how they determine what languages SNAP E&T services are provided in | 98 | | |
| | | Other method (please describe) | 99 | | |
| | O | SNAP State agency does not determine in which language to provide SNAP E&T services | 0 | | |
| ALL | | | | | |
| E5. | | each about SNAP E&T services to LEP individuals conducted the sa r SNAP services? | me way it is for | | |
| | O | Yes | 1 | | |
| | O | No | 0 | | |

E6. How do staff in your State conduct outreach to the LEP communities about SNAP E&T services?

| Selec | ct all that apply |
|-------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Posting signs in intake areas and other entry points1 |
| | Distributing outreach documents about SNAP services2 |
| | Working with community-based organizations and other stakeholders to inform LEP individuals of SNAP services |
| | Using a telephone voice mail menu4 |
| | Including notices in local newspapers in languages other than English5 |
| | Providing notices on non-English–language radio and television stations about the available SNAP services and how to get them6 |
| | Delivering presentations and/or notices to organizations in the community (e.g., schools, religious institutions, senior centers, community centers) |
| | Other(specify)99 |
| | |
| O | Staff in the State have not conducted outreach to the LEP communities about SNAP E&T services |

ALL

E7. Does your SNAP State agency require <u>SNAP E&T providers</u> to provide <u>the following services so that LEP individuals can</u> access SNAP E&T services?

[DEFINITION OF SNAP E&T PROVIDERS WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM]

[DEFINITION OF QUALIFIED INTERPRETER WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM]

Select one per row

| | | YES | NO | Policy or guidance gives local SNAP offices or E&T providers flexibility in how they provide these services |
|----|------------------------|-----|------------------|----------------------------------------------------------------------------------------------------------------------------|
| a. | Translation materials | O 1 | O 0 | 98 🔾 |
| b. | Qualified interpreters | 1 O | \mathbf{C}_{0} | 98 🔾 |

| ΛΙ | |
|----|--|
| ΑI | |

| E8. | Does the SNAP State agency or do SNAP E&T providers offer English as a Second Language |
|-----|----------------------------------------------------------------------------------------|
| | (ESL) classes as an E&T component? |

[DEFINITION OF SNAP E&T PROVIDERS WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM]

| \mathbf{O} | Yes | . 1 |
|--------------|-----|-----|
| | | |

O No......

| E9. | Do the SNAP State agency or <u>SNAP E&T providers</u> partner with any of the following program provide ESL classes as an E&T component? | | | | |
|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------|--|--|
| | [DEFINITION OF SNAP E&T PROVIDERS WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | |
| | Seled | ct all that apply | | | |
| | | Workforce Investment and Opportunity Act Title II programs | 1 | | |
| | | D-SNAP program in state | 2 | | |
| | | SNAP Ed program in state | 3 | | |
| | | TANF workforce programs | 4 | | |
| | | Other State LEP programs | 5 | | |
| | | Other (specify) | 99 | | |
| | | | | | |
| | | | | | |
| ALL | | | | | |
| | | | | | |
| 10. | How d | o SNAP E&T services offered in other languages differ from those | offered in English? | | |
| 10. | | o SNAP E&T services offered in other languages differ from those of ct all that apply | offered in English? | | |
| E10. | | | | | |
| :10. | Seled | ct all that apply | 1 | | |
| :10. | Seled | ct all that apply Fewer service options | 1 | | |
| :10. | Selec | ct all that apply Fewer service options More individualized support | 1 2 3 | | |
| :10. | Selec | Ct all that apply Fewer service options More individualized support Fewer community college classes | 1234 | | |
| :10. | Selection | Fewer service options | 12345 | | |
| =10 . | Selection | Fewer service options | 123456 | | |
| ±10 . | Select | Fewer service options | 123456 | | |
| ≣10. | Selec | Fewer service options | 123456 | | |
| ≣10. | Selec | Fewer service options | 123456 | | |
| ≅10. | Selec | Fewer service options | 123456 | | |
| | Selec | Fewer service options | 123456 | | |
| ALL | Selec | Fewer service options | 123456799 | | |
| ALL | Selection of the select | Fewer service options | 123456799 | | |

mandate SNAP E&T participation98

| E11 : | = 1 | | | | |
|-------|-----------------------|-------------------------------------------------------------------------------------------|--|--|--|
| E12. | Does | our SNAP State agency exempt any LEP individuals from E&T participation? | | | |
| | Select all that apply | | | | |
| | | Yes, we exempt all LEP individuals1 | | | |
| | | Yes, we exempt some LEP individuals if we cannot serve the language they speak2 | | | |
| | O | No, we do not exempt any LEP individuals from SNAP E&T participation0 | | | |
| E11 : | = 1 | | | | |
| E13. | How d | o your SNAP State agency or <u>SNAP E&T providers</u> identify LEP individuals? | | | |
| | - | IITION OF SNAP E&T PROVIDERS WILL DISPLAY WHEN RESPONDENT HOVERS OVEF RLINED TERM] | | | |
| | Sele | ct all that apply | | | |
| | | Assume limited English proficiency if communication seems impaired1 | | | |
| | | Respond to individual requests for language assistance services2 | | | |
| | | The non-English speaker or LEP individual self-identifies as LEP3 | | | |
| | | Ask open-ended questions to determine language proficiency on the telephone or in person4 | | | |
| | | Use of I Speak language identification cards or posters5 | | | |
| | | Based on written material submitted to the agency (e.g., complaints)6 | | | |
| | | We do not identify non-English speakers or LEP individuals7 | | | |
| | | Other (specify)99 | | | |
| | | | | | |

| E14. If an individual with limited English proficiency needed to be placed how would the SNAP State agency or SNAP E&T providers accomm [DEFINITION OF SNAP E&T PROVIDERS WILL DISPLAY WHEN RESP UNDERLINED TERM] Select all that apply LEP individuals are not placed in certain components if the providence cannot accommodate the language need | nodate this? |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| UNDERLINED TERM] Select all that apply LEP individuals are not placed in certain components if the providence of the p | PONDENT HOVERS OVER |
| ☐ LEP individuals are not placed in certain components if the provided in the | |
| | |
| | |
| $\ \square$ We provide mostly case management services in their language. | 2 |
| ☐ We provide mostly job search assistance in their language | 3 |
| ☐ LEP individuals are referred to ESL classes | 4 |
| ☐ LEP individuals are exempt from mandatory SNAP E&T | 5 |
| ☐ LEP individuals are referred to specific partners that offer compoin their language | |
| ☐ Other (specify) | 99 |
| | |
| | |
| | |
| E11=1 | |
| E11=1 E15. What practices do the SNAP State agency or <u>SNAP E&T providers</u> u into an appropriate component? | use to place LEP individual |
| E15. What practices do the SNAP State agency or <u>SNAP E&T providers</u> u | · |
| E15. What practices do the SNAP State agency or SNAP E&T providers u into an appropriate component? [DEFINITION OF SNAP E&T PROVIDERS WILL DISPLAY WHEN RESP | · |
| E15. What practices do the SNAP State agency or SNAP E&T providers u into an appropriate component? [DEFINITION OF SNAP E&T PROVIDERS WILL DISPLAY WHEN RESF UNDERLINED TERM] | PONDENT HOVERS OVER |
| E15. What practices do the SNAP State agency or SNAP E&T providers u into an appropriate component? [DEFINITION OF SNAP E&T PROVIDERS WILL DISPLAY WHEN RESP UNDERLINED TERM] Select all that apply | PONDENT HOVERS OVER |
| E15. What practices do the SNAP State agency or SNAP E&T providers us into an appropriate component? [DEFINITION OF SNAP E&T PROVIDERS WILL DISPLAY WHEN RESE UNDERLINED TERM] Select all that apply Done at the case manager's discretion | PONDENT HOVERS OVER1 uals2 |

□ Other (specify)......99

| E16. | Does your SNAP State agency use "good cause" to protect LEP individuals from adverse action if they cannot participate in programs because of language barriers? [Hover over definition of good cause: Individuals who can present good cause for not complying with a SNAP requirement (such as a work requirement, reporting requirement, or recertification for SNAP) can continue to receive benefits after their certification period ends. Good cause can include sickness, problems with the mail, and other issues outside the household's control.] | | | | | |
|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| | | | | | | |
| | • | Yes1 | | | | |
| | O | No0 | | | | |
| ALL | | | | | | |
| E_END | abo box | ank you for completing this section. If you have more information you would like to share out SNAP E&T language access procedures in your State or Territory, please share it in the below. TRING 1000) | | | | |

E12 = 0

Section 6. D-SNAP LANGUAGE ACCESS PROCEDURES

The next set of questions are about language services provided in D-SNAP programs.

| ALL | | | | | |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|--|--|--|
| F1. | When | was the last time your State needed to use D-SNAP? | | | |
| | O | Less than 2 years ago1 | | | |
| | 0 | 2-5 years ago2 | | | |
| | O | Greater than 5 years ago | | | |
| F1 = | 1 OR 2 | | | | |
| F2. | Does your State offer in-person, telephone, or online D-SNAP applications? Answer according to your State's most up to date plan, even if some policies were put in place to accommodate customers during the pandemic. | | | | |
| | Sele | ct all that apply | | | |
| | | In-person D-SNAP applications1 | | | |
| | | Telephone D-SNAP applications2 | | | |
| | | Online D-SNAP applications3 | | | |
| F2=1 | | | | | |
| F3. | How are language assistance services provided during D-SNAPs to applicants that apply in person? | | | | |
| | [DEFINITION OF TRANSLATION WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | |
| | [DEFINITION OF INTERPRETATION WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | |
| | Select all that apply | | | | |
| | | Pre-recorded informational messages are broadcasted in multiple languages at the application site1 | | | |
| | | Translation and interpretation services are available on site (at the application site)2 | | | |
| | | <u>Translation</u> and <u>interpretation</u> services are available virtually (online or by phone)3 | | | |
| | | Written translated materials are available on site4 | | | |
| | | Other (specify)99 | | | |
| | | | | | |
| | | | | | |

| F2=2 | | | | | |
|------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--|--|--|
| F4. | How are language assistance services provided during D-SNAPs to applicants that apply by telephone? | | | | |
| | [DEFINITION OF TRANSLATION WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | |
| | [DEFINITION OF INTERPRETATION WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | |
| | Select all that apply | | | | |
| | | Telephone <u>translation</u> and <u>interpretation</u> services available1 | | | |
| | | Pre-recorded informational messages are broadcast in multiple languages2 | | | |
| | | Other (specify)99 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| F2=3 | | | | | |
| F5. | How are language assistance services provided during D-SNAPs to applicants that apply online? | | | | |
| | [DEFINITION OF TRANSLATION WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | |
| | [DEFINITION OF INTERPRETATION WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | |
| | Select all that apply | | | | |
| | | Online <u>translation</u> and <u>interpretation</u> services available1 | | | |
| | | Video (such as Skype or Zoom) <u>interpretation</u> services provided by SNAP State agency2 | | | |
| | | Written translated materials are available online3 | | | |
| | | Other (specify)99 | | | |

| F1 = | 1 OR 2 | | | |
|------|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--|
| F6. | How does the SNAP State agency provide training to staff providing D-SNAP services about Title VI and language access requirements? | | | |
| | | Online trainings | 1 | |
| | | Conferences | 2 | |
| | | Group in-person trainings | 3 | |
| | | Group virtual trainings | 4 | |
| | | One-on-one virtual trainings | 5 | |
| | | On-the-job training [Hover over text: On-the-job training typically involves a combination of observing others and hands-on experience under the supervision of a training manager, co-worker, or outsourced professional trainer] | 6 | |
| | | Other (specify) | 99 | |
| | | | | |
| | O | No, there is no training provided | 0 | |
| | 0 | IF I1b = 0: There is variation in trainings about Title VI to D-SNAP provious counties within our State | ders across | |
| F1 = | 1 OR 2 | | | |
| F7. | Does your State offer D-SNAP documents (e.g. applications, notices, etc.) in languages oth than English? | | | |
| | • | Yes | 1 | |
| | O | No | 0 | |
| F1 = | 1 OR 2 | | | |
| F8. | How d | oes the SNAP State agency decide into which languages to have D- ted? | SNAP materials | |
| | Seled | ct all that apply | | |
| | | The SNAP State agency collects demographic information of potential individuals before a disaster | 1 | |
| | | The SNAP State agency has an up-to-date, formal pre-disaster database in place | 2 | |
| | | The SNAP State agency translates materials into the major languages spoken by non-English speakers in the State | 3 | |

☐ The same process used for the regular SNAP State program is used for D-SNAP......4

□ Other (specify)......99

| F1 = | 1 OR 2 | | | | |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|------|--|--|
| F9. | Does the SNAP State agency have the necessary agreements, contracts, and memoranda of understanding (MOUs) in place to on-board <u>qualified interpreters</u> when needed in case of a D-SNAP? | | | | |
| | [DEFINITION OF QUALIFIED INTERPRETER WILL DISPLAY WHEN RESPONDENT HOVERS OVELUNDERLINED TERM] | | | | |
| | O | Yes- qualified interpreters are available for D-SNAP when needed1 | | | |
| | 0 | No- qualified interpreters are not available for D-SNAP when needed0 | | | |
| F9=1 | | | | | |
| F10. | How does the SNAP State agency decide in which languages to have <u>qualified interpreters</u> in reserve for? | | | | |
| | [DEFINITION OF QUALIFIED INTERPRETER WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | |
| | Seled | ct all that apply | | | |
| | | The SNAP State agency collects demographic information of potential individuals before a disaster1 | | | |
| | | The SNAP State agency has an up-to-date, formal pre-disaster database in place2 | | | |
| | | We partner with an organization or service that can provide qualified interpreters when needed3 | | | |
| | | The same process used for the regular SNAP State program is used for D-SNAP4 | | | |
| | | Other (specify)99 | | | |
| | | | | | |
| - 4 | 1.00.0 | | | | |
| F1 = | 1 OR 2 | | | | |
| F11. | | language services are not available in the LEP individual's language, what strategies on NAP State agency use? | does | | |
| | Seled | ct all that apply | | | |
| | | Refer the individual to other organizations or resources1 | | | |
| | | Let the individual know your agency can not help them at this time2 | | | |
| | | Work with the individual but not in their preferred language- it is up to them to get the materials translated by a friend or family member3 | | | |
| | | Find someone who can interpret or translate and offer their services to the individual free of charge4 | | | |
| | | Other (specify)99 | | | |
| | | | | | |
| F1 = | 1 OR 2 | | | | |
| | | | | | |

| F12. | Hov | does the SNAP State agency decide in which languages D-SNAP outreach should take e? |
|----------|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Selec | ct all that apply |
| | | The SNAP State agency collects demographic information of potential individuals before a disaster1 |
| | | The SNAP State agency has an up-to-date, formal pre-disaster database in place2 |
| | | The SNAP State agency translates materials into the major languages spoken by non-English speakers in the State |
| | | The same process is used for D-SNAP as is used for the regular SNAP program4 |
| | | Other (specify)99 |
| F1 = 1 C | DR 2 | |
| F_END. | abo | nk you for completing this section. If you have more information you would like to share ut D-SNAP language access procedures in your State or Territory, please share it in the below. |
| | (S1 | TRING 1000) |

SECTION 7. SNAP-ED LANGUAGE ACCESS PROCEDURES

The next questions are about the language assistance services provided in SNAP-Ed.

| ALL | | | | | |
|-----|--------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--|--|
| G1. | How are <u>SNAP-Ed contractors</u> informed of Title VI and their language access requirements b the SNAP State agency? | | | | |
| | | over definition of SNAP-Ed contractors: SNAP-Ed contractors are the many the services to customers.] | anagement entities | | |
| | Seled | ct all that apply | | | |
| | | Virtual meetings | 1 | | |
| | | In-person meetings | 2 | | |
| | | SNAP internal website | 3 | | |
| | | SNAP external website | 4 | | |
| | | Email updates | 5 | | |
| | | Updates sent by mail (e.g., brochures and memos) | 6 | | |
| | | Phone call to SNAP-Ed providers | 7 | | |
| | | Other (specify) | 99 | | |
| | | | | | |
| | O | SNAP State agency does not have a way to inform SNAP-Ed | | | |
| | | contractors of Title VI and language access requirements | 0 | | |
| | | | | | |
| | | | | | |
| ALL | | | | | |
| 2. | Does the SNAP State agency provide training to SNAP-Ed <u>contractors</u> about Title VI and the language access requirements? | | | | |
| | [DEFIN | IITION OF SNAP-ED CONTRACTORS WILL DISPLAY WHEN RESPON | DENT HOVERS O | | |
| | UNDE | RLINED TERM] | | | |
| | _ | Online tunining | 4 | | |
| | | Online trainings | | | |
| | | Conferences | | | |
| | | Group in-person trainings | | | |
| | | Group virtual trainings | | | |
| | | One-on-one virtual trainings | 5 | | |
| | | On-the-job training [Hover over text: On-the-job training typically involves a combination of observing others and hands-on experience under the supervision of a training manager, co-worker, or outsourced professional trainer.] | 6 | | |
| | _ | professional trainer] | | | |
| | | Other (specify) | 99 | | |

| | • | No, there is no training provided | | 0 | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------------------------------------------------------------------|--------------|----------------------|--|--|--|
| | 0 | IF I1b = 0: There is variation in trainings about Title VI to SNAP-counties within our State | | | | | |
| ALI | <u>L</u> | | | | | | |
| G3. | | ne SNAP State agency require <u>SNAP-Ed contractors</u> to the fo P individuals can access SNAP-Ed opportunities? | ollowing | types of services so | | | |
| | | [DEFINITION OF SNAP-ED CONTRACTORS AND QUALIFIED INTERPRETER WILL DISPLAY WHEN RESPONDENT HOVERS OVER UNDERLINED TERM] | | | | | |
| | | | Select | one per row | | | |
| | | | YES | NO | | | |
| a. | Translated | materials | 1 O 1 | O 0 | | | |
| b. | Qualified i | nterpreters | 1 O | O 0 | | | |
| | | | | | | | |
| ALI | <u>_</u> | | | | | | |
| G4. Do SNAP-Ed contractors offer SNAP-Ed documents (e.g. applications, notices, etc.) in languages other than English? | | | | | | | |
| | O | Yes | | 1 | | | |
| | O | No | | 0 | | | |
| | | | | | | | |
| | | | | | | | |
| ALI | _ | | | | | | |
| G_END. Thank you for completing this section. If you have more information you would like to share about SNAP Ed language access procedures in your State or Territory, please share it in the box below. | | | | | | | |
| | | | | | | | |
| | (ST | RING 1000) | | | | | |

END. You have completed all the sections. Thank you for your time on this important survey.