Federal Language Access Survey

Executive Order 13166, issued in August 2000, requires, among other things, that each federal department and agency “examine the services it provides and develop and implement a system by which [limited English proficient (LEP)] persons can meaningfully access those services consistent with, and without unduly burdening, the fundamental mission of the agency.” All of the federal government’s programs and activities are covered by this Executive Order.

Now that more than five years have passed since the Executive Order was issued, we are seeking your assistance to assess the overall federal LEP effort. The goals of the survey are to: determine the effectiveness of LEP resources; learn about the scope of each department’s/agency’s/component’s/division’s LEP program; identify best practices; and develop plans for providing more effective federal service to the LEP community. (In the survey, the term “agency” refers to department, agency, component, or division with LEP responsibilities.) If answers to any of the survey questions require more space than provided, please attach your responses on a separate sheet(s) of paper.

Please Type or Print Legibly.

(1) a. Name of agency: ____________________________________________________________
   b. How many components are within your agency? ________________________________
   c. Name of component(s) with LEP responsibilities: ______________________________
   d. How many divisions are within your component? ________________________________
   e. Name of division(s) with LEP responsibilities: _________________________________

(2) Name, title, telephone number, and email address of the person completing the survey.
______________________________________________________________________________
______________________________________________________________________________

(3) a. Are you responsible at your agency for managing or coordinating the LEP program? 
   (Circle one) Yes No
   b. If no, please identify the person(s) who are responsible and provide their name(s), title(s),
      telephone number(s), and email address(es).
______________________________________________________________________________
______________________________________________________________________________

(4) a. Has your agency prepared an LEP Language Assistance Plan (LAP) that addresses your
    federally conducted activities? (Circle one) Yes No
   b. Does your agency have more than one LAP? (Circle one) Yes No
c. Has your agency established separate plans at your different locations or do you have a single, national LAP?  
(Circle one)  Single LAP/National  Separate LAPS/Different Locations

d. If you currently do not have a LAP, what is your timeline for developing a plan within the next 12 months?  __________________________________________________________

(5) In developing your LAPS, did your agency:

a. Use any of the guidance prepared by the Department of Justice, Civil Rights Division?  
(Circle one)  Yes  No

b. Use the instructional DVD on LEP requirements entitled “Breaking Down the Barrier, Translating Limited English Proficiency into Proficiency into Practice,” jointly produced by the Department of Health and Human Services’ Office for Civil Rights, the Department of Agriculture’s Food and Nutrition Service, and the Department of Justice’s Civil Rights Division?  
(Circle one)  Yes  No

c. Visit the LEP website at www.lep.gov?  (Circle one)  Yes  No

d. If you visited the LEP website, did you find information helpful in the preparation of your LAPS?  
(Circle one)  [Not Helpful]  1  2  3  4  5  [Extremely Helpful]

e. If you found the lep.gov website to be helpful, please list the resources that you found most useful:  __________________________________________________________

f. If you determined that lep.gov was not helpful, please let us know how we might make the website more helpful in the future:  __________________________________________________________

g. Has your agency established a budget component for your LEP activities?  
(Circle one)  Yes  No

(6) a. When developing your plan(s), how did you identify the LEP populations for whom you would provide language assistance?  __________________________________________________________

b. What sources or resources did you use?  __________________________________________________________
c. Did you use the Census Bureau website?  (Circle one)  Yes  No

d. When identifying the LEP community or designing a plan, did your agency consult with local governmental (e.g., school board, state department of education, foreign consulates, etc.) or non-governmental organizations (e.g., places of worship, civic groups, civil rights organizations, etc.)?  (Circle one)  Yes  No
If yes, please describe: ________________________________

(7)  How does your agency provide language assistance?

a. Are signs or posters placed in public access locations provided in languages other than English?  (Circle one)  Yes  No
If yes, in what languages? ________________________________

b. Have vital written materials been translated?  (Circle one)  Yes  No
If yes, in what languages? ________________________________

c. How does your agency define “vital written materials”? ________________________________

d. How are members of the public apprised of the availability of these translated documents? ________________________________

e. How does your agency assist LEP persons who seek assistance in person:  (Circle all that apply)
Hiring of interpreters/translator(s)  Bi-or multi-lingual staff with other duties
Other (describe): ________________________________

f. If your agency uses current staff, are these collateral duty assignments or part of the employee’s regular job duties?  (Circle one)  Collateral duty assignments  Part of regular duties

g. Does your agency have agreements with other federal agencies, with state or local agencies, or with non-governmental organizations to provide LEP assistance?  (Circle one)  Yes  No

h. If yes, please identify these agencies or organizations: ________________________________

i. Are these agreements reciprocal in nature?  (Circle one)  Yes  No

j. Does your agency use a telephone-based interpretation service for assistance with LEP constituents whose language needs are not met by staff or other local assistance?  (Circle one)  Yes  No
k. If no, please explain how your agency meets the needs of these persons.
__________________________________________________________________________________
__________________________________________________________________________________

l. Does your agency use the family members or friends of an LEP constituent needing assistance?  
   (Circle one)  Yes       No

(8) a. Has your agency provided web-based language assistance to your LEP constituents? 
   (Circle one)  Yes       No

b. Do you have a disaster-preparedness or emergency information available on your website? 
   (Circle one)  Yes       No

c. Is this information available in languages other than English?  (Circle one)  Yes       No  
   If yes, in what languages? ____________________________________________________________
   Please provide relevant web address(es): _________________________________________________
__________________________________________________________________________________

   d. Are other documents available on your webpage in languages other than English? 
      (Circle one)  Yes       No

   e. If yes, please provide the relevant web address(es):
      ____________________________________________________________
      ____________________________________________________________

   f. Has your agency provided FirstGov en Español and the Federal Citizen Information Center’s 
      multilingual website with links to your multilingual material?  (Circle one)  Yes       No 
      If yes, in what languages? _____________________________________________________________

   g. If no, does your agency have plans to add foreign language webpages and, if so, when? 
      (Circle one)  Yes       No       By when? _________________________________________________

(9) a. Has your agency provided LEP training to staff?  (Circle one)  Yes       No

b. Is LEP training given to all employees or only to those with direct LEP contact or responsibility?  (Circle one)  All employees       Only those with LEP contact/responsibility

c. Are new employees given LEP training?  (Circle one)  Yes       No
(10) a. Does your agency monitor the effectiveness of its LAP? *(Circle one)* Yes No

b. If so, please explain how: _____________________________________________________________
__________________________________________________________________________________

c. Has your agency published its LAP and made it available for comment? *(Circle one)* Yes No

d. Has your agency consulted with/sought input from the LEP community (including non-governmental organizations such as faith-based groups, civic groups, civil rights organizations, etc.) regarding the on-going effectiveness of the plan? *(Circle one)* Yes No

If yes, please identify any such groups:
__________________________________________________________________________________

(11) a. Does your agency plan any modifications to its current LAP? *(Circle one)* Yes No

b. If yes, please explain how the agency has determined that modification are needed and generally describe proposed modifications: _______________________________________________________
__________________________________________________________________________________

(12) Please describe what you believe to be your success and/or best practices regarding language access: _______________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

(13) Please describe what you believe to be your biggest challenges regarding language access issues, and how you addressed them: _______________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

(14) a. Do you currently participate on the Federally Conducted Committee of the Federal Interagency Working Group on LEP? *(Circle one)* Yes No

b. If no, would you like to receive future Committee meeting and email announcements? *(Circle one)* Yes No

c. Please list the name, title, telephone number, and email address of the agency contact who should receive such announcements: _______________________________________________________
__________________________________________________________________________________
Please submit responses to:

Federal Language Access Survey
c/o Merrily Friedlander
Chief
Coordination and Review Section
Civil Rights Division
U.S. Department of Justice
950 Pennsylvania Avenue, NW - NYA
Washington, DC 20530

We look forward to receiving your responses by April 28, 2006. Thank you for your time and attention to this important federal effort.