

DEPARTMENT OF HOMELAND SECURITY
CIVIL RIGHTS EVALUATION TOOL

OMB Control No. 1601-0024
 Expiration Date 08/31/2024

Section 1: Instructions

Recipients (as defined in 2 C.F.R. Part 200 and including recipients acting as pass-through entities) of Federal financial assistance from the U.S. Department of Homeland Security (DHS) or one of its awarding component agencies must complete this tool within thirty (30) days of receipt of the Notice of Award for the first award under which this term applies. Recipients of multiple awards of DHS financial assistance should only submit one completed tool for their organization, not per award.

Recipients should submit the completed tool, including supporting materials, to CivilRightsEvaluation@hq.dhs.gov. This tool clarifies the civil rights obligations and related reporting requirements contained in the [DHS Standard Terms and Conditions](#).

Subsequent submissions: After the initial submission, recipients are required to complete the tool once every two (2) years if they have an active award, not every time an award is made. After the initial submission, recipients are only required to submit updates. If there are no updates since the initial submission, the recipient can indicate "no change" for each item as applicable to satisfy the biyearly requirement. Recipients should not re-submit information previously submitted. The due date for submitting updates is calculated from two (2) years from the date the recipient last submitted the tool to DHS. DHS will send an email reminder to the contact person identified in Section 2 prior to the due date for the biyearly update.

Subrecipients: Subrecipients are not required to complete and submit this tool to DHS. However, subrecipients have the same obligations as pass-through entities and recipients to comply with applicable civil rights requirements and should follow their pass-through entities' instructions for submitting civil rights information to those entities.

Extensions: The DHS Office for Civil Rights and Civil Liberties will consider, in its discretion, granting an extension if the recipient identifies steps and a timeline for completing the tool. Recipients should request extensions by emailing the request to CivilRightsEvaluation@hq.dhs.gov prior to expiration of the 30-day deadline.

Section 2: Organization Information

Organization Name: Western Berks Ambulance Association	DUNS Number: LYWDFLXN33K8
Address (Street, City, State, Zip code): 2506 Belmont Ave., Reading, PA 19609	
Contact Person / Title: Anthony Tucci, Executive Director	
Email / Telephone: atucci@wbems.org / 610-678-1545	
Grant Agreement Number: EMW-2021-FG-02874	Federal Award Identification Number: EMW-2021-FG-02874

Section 3: Civil Rights Requirements

As a condition of receipt of Federal financial assistance, the recipient is required to comply with applicable provisions of laws and policies prohibiting discrimination, including but not limited to:

- Title VI of the Civil Rights Act of 1964, which prohibits discrimination based on race, color, or national origin (including limited English proficiency).
- Section 504 of the Rehabilitation Act of 1973, which prohibits discrimination based on disability.
- Title IX of the Education Amendments Act of 1972, which prohibits discrimination based on sex in education programs or activities.
- Age Discrimination Act of 1975, which prohibits discrimination based on age.
- U.S. Department of Homeland Security regulation 6 C.F.R. Part 19, which prohibits discrimination based on religion in social service programs.

Section 4: Required Information

1. Provide the total number of complaints or lawsuits against the recipient during the past three (3) years alleging discrimination on the basis of race, color or national origin (including limited English proficiency), sex, age, disability, religion, or alleging retaliation. For each complaint or lawsuit, state the following:
 - a. Employment or non-employment related;
 - b. Basis (race; color; national origin, including limited English proficiency; sex; age; disability; religion); or alleging retaliation; and
 - c. Status (pending, closed with findings, closed with no findings).Additionally, if a court or administrative agency made a finding of discrimination in a non-employment complaint for the above three (3) years, forward a copy of the complaint and findings to DHS.
Responses should not include personally identifiable information (PII) that is outside of public record. PII is any information that permits the identity of an individual to be directly or indirectly inferred, including any information which is linked or linkable to an individual.
2. Provide a brief description of any civil rights compliance reviews regarding the recipient conducted during the two (2) year period before this award of DHS Federal financial assistance.
3. Provide a statement affirming that staff has been designated to coordinate and carry out the responsibilities for compliance with civil rights laws, and a description of the responsibilities of any such staff.
4. Provide a copy of the recipient's nondiscrimination policy statement referencing the laws and regulations in Section 3.
5. Provide a copy of the recipient's discrimination complaints process.
6. Provide a copy of the recipient's plan to ensure compliance in subrecipient programs (only applies to state administering agencies and other recipients that provide assistance to subrecipients). The plan should describe the process for conducting reviews of subrecipients.
7. Provide copies of the recipient's policy and procedures used to ensure nondiscrimination and equal opportunity for persons with disabilities to participate in and benefit from the recipient's programs and services.
8. Provide copies of the recipient's policy and procedures regarding the requirement to provide meaningful access to programs and services to individuals with limited English proficiency (LEP).

Section 5: Additional Information

Resources for recipients related to the above requirements: <http://dhs.gov/resources-recipients-dhs-financial-assistance>

For questions and assistance with this form, please contact:

DHS Office for Civil Rights and Civil Liberties
Email: CivilRightsEvaluation@hq.dhs.gov
Phone: 202-401-1474
Toll Free: 1-866-644-8360
TTY: 202-401-0470
Toll Free TTY: 1-866-644-8361

Federal Emergency Management Agency, Office of Equal Rights (for FEMA recipients):

Email: fema-civil-rights-form@fema.dhs.gov
Phone: 202-646-3535

Paperwork Reduction Act

The public reporting burden to complete this information collection is estimated at 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and the completing and reviewing the collected information. The collection of information is mandatory. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number and expiration date. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to:

ATTN: PRA [OMB Control No.1601-NEW].
Office for Civil Rights and Civil Liberties
U.S. Department of Homeland Security
Building 410, Mail Stop #0190
Washington, D.C. 20528



**Western Berks
Ambulance Association**

2506 Belmont Avenue
West Lawn, PA 19609-1535

EMERGENCY TELEPHONE
911

BUSINESS TELEPHONE
610-678-1545

FAX NUMBER
610-670-3783



Appendix 1

Western Berks Ambulance Association

Department of Homeland Security
Civil Rights Evaluation Tool

Section 4 Required Information

Item 1:

Provide the total number of complaints or lawsuits against the recipient during the past three (3) years alleging discrimination on the basis of race, color, or national origin (including limited English proficiency), sex, age, disability, religion, or alleging retaliation. For each complaint or lawsuit, state the following:

- a. Employment or non-employment related;*
- b. Basis (race; color; national origin, including limited English proficiency; sex; age; disability; religion); or alleging retaliation; and*
- c. Status (pending, closed with findings, closed with no findings).*

Additionally, if a court or administrative agency made a finding of discrimination in a non-employment complaint for the above three (3) years, forward a copy of the complaint and findings to DHS.

The Western Berks Ambulance Association has not had any complaints or lawsuits against the recipient during the past three (3) years alleging discrimination on the basis of race, color, or national origin (including Limited English Proficiency), sex, age, disability, religion, or alleging retaliation.

Item 2:

Provide a brief description of any civil rights compliance reviews regarding the recipient conducted during the two (2) year period before this award of DHS Federal financial assistance.

The Western Berks Ambulance Association has not had any civil rights compliance reviews regarding the recipient conducted during the two (2) year period before this award of DHS Federal financial assistance.

Item 3:

Provide a statement affirming that staff has been designated to coordinate and carry out the responsibilities for compliance with civil rights laws, and a description of the responsibilities of any such staff.

The Title VI Coordinator of the Western Berks Ambulance Association is responsible for overseeing recipient compliance with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title IX of the Education Amendments of 1972. The Title VI Coordinator's responsibilities include overseeing the discrimination complaints process, developing and updating civil rights policies and procedures, processing requests for reasonable accommodations, coordinating the translation of vital documents, and processing requests for language interpretation.

Item 4:

Provide a copy of the recipient's nondiscrimination policy statement referencing the laws and regulations in Section 3.

Policy

Western Berks Ambulance Association is committed to ensuring that no person is excluded from participation in, denied the benefits of, or subjected to discrimination under any program, activity, or service that it provides. Western Berks Ambulance Association will not tolerate intimidation, threats, coercion, or discrimination against any individual or group. Western Berks Ambulance Association establishes a framework for taking reasonable steps to ensure access to all services provided by the Western Berks Ambulance Association for all citizens and establishes procedures whereby Western Berks Ambulance Association will receive and investigate allegations of discrimination.

- Title VI of the Civil Rights Act of 1964 is the overarching civil rights law that prohibits discrimination based on race, color, or national origin, in any program, service, or activity that receives federal assistance. Specifically, Title VI assures that “No person in the United States shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefit of, or be otherwise subjected to discrimination under any program or activity receiving federal assistance.” Nondiscrimination prohibitions have been further broadened and supplemented by related statutes, regulations, and executive orders;
- Title IX of the Education Amendments of 1972 (Title IX), which prohibits discrimination on the basis of sex in any education or training program receiving federal financial assistance, with a limited number of defined exceptions;
- Section 504 of the Rehabilitation Act of 1973 (Section 504), which forbids discrimination on the basis of an individual's disability by all federal agencies and in all federally funded activities;
- The Age Discrimination Act of 1975, as amended, which prohibits discrimination in federally supported activities on the basis of age;
- U.S. Department of Homeland Security regulation 6 C.F.R. Part 19, which prohibits discrimination based on religion in social service programs.

What Does This Mean?

The Western Berks Ambulance Association will not restrict an individual in any way from the enjoyment of any advantage or privilege enjoyed by others receiving any service, financial aid, or other benefit under any of its programs, regardless of the funding source for the program. Individuals may not be subjected to criteria or methods of administration which cause adverse impact because of their race, color, or national origin, or have the effect of defeating or substantially impairing the accomplishment of the objectives of the program because of race, color, or national origin.

Western Berks Ambulance Association will not tolerate intimidation, threats, coercion, or discrimination against any individual or group for the purpose of interfering with any right or

privilege guaranteed under law or regulations, or because the individual has filed a complaint or has testified, assisted, or participated in any way in an investigation, proceeding, or hearing or has opposed any Western Berks Ambulance Association action or decision.

It is against the law for Western Berks Ambulance Association to retaliate against anyone who takes action to oppose discrimination, files a grievance, or participates in the investigation of a grievance in accordance with the above authorities.

Item 5:

Provide a copy of the recipient's discrimination complaints process.

If someone believes they have suffered from discrimination under a Western Berks Ambulance Association provided service or program, they may contact the Title VI Coordinator of Western Berks Ambulance Association to seek a resolution.

Within 180 days of the alleged discrimination, complainants may submit a written or verbal complaint to the Title VI Coordinator. The Title VI Coordinator has been assigned as the Civil Rights Compliance Coordinator.

The primary means of initiating a complaint shall be through the Commendation / Complaint Form. The Commendation / Complaint Form shall be made available on the Western Berks Ambulance Association public website and at its station located at 2506 Belmont Ave., Reading, PA 19609.

- *The Commendation / Complaint Form is attached for reference in Appendix 2*

Complaints must include the complainant's name, the nature of the complaint of alleged discrimination, the date(s), time(s), and location(s) that the alleged discrimination occurred, the date of filing of the complaint, and contact information for the complainant. The resolution to the alleged discrimination may be informal or formal.

Western Berks Ambulance Association will take reasonable steps to ensure access to all people, and that accommodation is available to facilitate the communication with, and participation of, those persons with Limited English Proficiency and/or disability.

- All Western Berks Ambulance Association vehicles will be equipped with a Language Identification Guide ("I Speak ..." Point to Your Language Card)
 - *The Language Identification Guide ("I Speak ..." Point to Your Language Card) is attached for reference in Appendix 3*
- All Western Berks Ambulance Association vehicles that are equipped with a cellphone, tablet, or computer with internet access will also have the Language Identification Guide ("I Speak ..." Point to Your Language Card) installed, as well as an interactive written and audio transcription/translation program with all languages identified on the Language Identification Guide.
- All Western Berks Ambulance Association vehicles that are equipped with a cellphone, tablet, or computer with internet access will also have the Commendation / Complaint form installed that will be accessible through the interactive written and audio transcription/translation program with all languages identified on the Language Identification Guide.

- If a printer is not readily available, the interactive written translation program will be used to provide instructions to the complainant on various ways to access the Commendation / Complaint form, such as:
 - via the Western Berks Ambulance Association public website and/or social media account(s) that will have a language translation widget available for use at no cost
 - in person at Western Berks Ambulance Association stations, where a translated paper copy of the Commendation / Complaint form will be provided at no cost

Contact information for the Title VI Coordinator of the Western Berks Ambulance Association:

E-mail: atucci@wbems.org

Phone: 610-678-1545

U.S. Mail: Western Berks Ambulance Association
2506 Belmont Ave
Reading, PA 19609

You can also file a civil rights complaint with the U.S. Department of Homeland Security Office for Civil Rights and Civil Liberties (CRCL):

E-mail: CRCLCompliance@hq.dhs.gov (fastest method to submit your complaint)

Fax: 202-401-4708

U.S. Mail: U.S. Department of Homeland Security
Office for Civil Rights and Civil Liberties
Compliance Branch, Mail Stop #0190
2707 Martin Luther King, Jr. Ave., SE
Washington, D.C. 20528

For additional information: www.dhs.gov/crcl

Phone: 202-401-1474

Toll-Free: 1-866-644-8360

Complaint Processing

If the complaint is within the purview of Western Berks Ambulance Association, it will be promptly and impartially investigated. The Western Berks Ambulance Association's goal is to address complaints within 60 days of receipt. However, the time to investigate complaints carefully may be longer depending on the nature of the complaint and the complexity of the issue.

Preliminary Inquiry:

The Title VI Coordinator will conduct a preliminary inquiry to determine the need for further investigation.

The Title VI Coordinator will review the complaint and may solicit additional information from the complainant as needed. The case may be closed if additional information is requested and not received. The case may also be closed if the complainant no longer wishes, at any point in time, to pursue their complaint.

If the preliminary inquiry indicates an investigation is not warranted, the complainant will be notified in writing of the reasons why and factors considered.

If the preliminary inquiry by the Title VI Coordinator of the Western Berks Ambulance Association indicates that an investigation is warranted, the complainant will be notified in writing, and an interview will be scheduled.

As a result of the interview, an informal resolution, if agreed to by the complainant and the Title VI Coordinator, will rectify the issue presented in an as-expedient manner as possible.

Complaints warranting further investigation, and a formal resolution, will be promptly and impartially processed by the Title VI Coordinator.

The complainant will be notified in writing of the results of the investigation, what actions will be taken as a formal resolution response, and a timeline to request review.

Item 6:

Provide a copy of the recipient's plan to ensure compliance in subrecipient programs (only applies to state administering agencies and other recipients that provide assistance to subrecipients). The plan should describe the process for conducting reviews of subrecipients.

Not Applicable.

Item 7:

Provide copies of the recipient's policy and procedures used to ensure nondiscrimination and equal opportunity for persons with disabilities to participate in and benefit from the recipient's programs and services.

It should be noted that the Western Berks Ambulance Association does not provide the service of initially receiving requests for emergency service responses or dispatching the appropriate emergency services (police, fire, and/or EMS) based upon the initial receipt of the requested service, i.e., 911 call center and dispatching service. Specifically, the Berks County Communications Center is responsible for those services. The specific policies and procedures of the Berks County Communications Center do not fall under the purview of the Western Berks Ambulance Association. However, the Berks County Communications Center has sufficient safeguards in place to ensure that LEP persons can immediately communicate the nature of the emergency through the use of bilingual staff members, on-demand translation services, and TDD or TTY communication devices.

- *The Berks County Communication Center's Standard Operating Procedure # 02.04.01.18002 and Quality Assurance Standard Evaluation Guidelines are attached for reference in Appendix 4*

Upon being dispatched by the Berks County Communications Center to respond to an emergency location, the Western Berks Ambulance Association will be notified of an LEP reporting party. The Western Berks Ambulance Association will immediately respond to the location and render the appropriate emergency service. If necessary for immediate communication with an LEP reporting party or recipient of emergency services, the Western

Berks Ambulance Association will re-establish communication with the Berks County Communications Center for the continued communication through the use of translation services and TDD or TTY communication devices.

If exigent communication is not required for life and property preservation, the Western Berks Ambulance Association will use the Language Identification Guide (“I Speak ...” Point to Your Language Card), referenced in Item 5, along with the interactive written and audio translation/transcription program with all languages identified on the Language Identification Guide available on Western Berks Ambulance Association vehicles that are equipped with a cellphone, tablet, or computer with internet access, also reference in Item 5. The Language Identification Guide (“I Speak ...” Point to Your Language Card) and the interactive written and audio translation/transcription program are available for installation and use on personally-owned cellphones and tablets of Western Berks Ambulance Association personnel.

To ensure nondiscrimination and equal opportunity for LEP persons and/or persons with disabilities to participate in and benefit from the non-emergency programs and services offered by the Western Berks Ambulance Association, all such non-emergency programs and services are offered on the Western Berks Ambulance Association public website that can, and will, be translated/transcribed into all languages identified of the Language Identified Guide through the interactive written and audio translation/transcription program installed on all cellphones, tablets, and computers with internet access owned by the Western Berks Ambulance Association. And/or, through the use of a translation/transcription application “widget” that will be installed on the home page of the Western Berks Ambulance Association public website and/or social media account(s) as well as being posted within Western Berks Ambulance Association stations. Additionally, the following notice is posted on the Western Berks Ambulance Association’s public website -

NOTICE

Reasonable Accommodations for Individuals with Disabilities

The Western Berks Ambulance Association is committed to providing individuals with disabilities an equal opportunity to participate in and benefit from our programs, activities, and services.

Individuals may request reasonable accommodations from the Western Berks Ambulance Association that they believe will enable them to have such equal opportunity to participate in our programs, activities, and services. To request reasonable accommodations, contact the Title VI Coordinator at 610-678-1545 or atucci@wbems.org.

FREQUENTLY ASKED QUESTIONS (FAQs)

The following FAQ provides information on requesting reasonable accommodations in Western Berks Ambulance Association’s programs and activities.

1. What is a reasonable accommodation in Western Berks Ambulance Association’s program?

- A reasonable accommodation is a change or modification to afford a qualified individual with a disability full enjoyment of Western Berks Ambulance Association’s programs or activities, unless modifications of policies, practices, and procedures would fundamentally alter the nature of the program, service, or activity, or result in undue financial and administrative burdens to the Western Berks Ambulance Association.

2. How do I request a reasonable accommodation?

- If you need a reasonable accommodation, please contact the Title VI Coordinator at:
 - 610-678-1545, or
 - atucci@wbems.org, or
 - the station at 2506 Belmont Ave., Reading, PA 19609.

3. Does my request for a reasonable accommodation need to be in writing?

- No, you do not need to put your request in writing, however, making a written request can be helpful documentation for ensuring that the Western Berks Ambulance Association provides the desired accommodation. In addition, you do not need to use the specific words “reasonable accommodations” when making your request.

4. When should I request a reasonable accommodation?

- You may request a reasonable accommodation from the Western Berks Ambulance Association at any time. However, making the request in advance of a meeting, conference call, or visit will help ensure that the Western Berks Ambulance Association is able to fulfill the request for an accommodation. For certain requests, such as requests for sign language interpretation, the Western Berks Ambulance Association requests at least two weeks advance notice.

5. May someone request a reasonable accommodation on my behalf?

- Yes, anyone can request a reasonable accommodation on behalf of an individual with a disability who seeks to interact with the Western Berks Ambulance Association staff or participate in its programs or activities.

6. What will the Western Berks Ambulance Association do upon receiving my request for a reasonable accommodation?

- The Western Berks Ambulance Association may contact you to obtain more information about your request and to better understand your needs. In addition, the Western Berks Ambulance Association may review your request to determine:
 - Whether the requested accommodation will be effective in allowing you to participate in the activity or program in which you are seeking participation;
 - Whether the requested accommodation is reasonable, or an equally effective alternative to the requested accommodation is available; and
 - Whether providing you with the requested accommodation would fundamentally alter the nature of the Western Berks Ambulance Association’s program or impose undue financial or administrative burdens on the Western Berks Ambulance Association.

In addition, in some cases, the Western Berks Ambulance Association may consult with you in an interactive process to determine on a case-by-case basis what accommodations can be made. If the Western Berks Ambulance Association determines that your requested accommodation would fundamentally alter the nature of the program or impose an undue financial or administrative burden, the Western Berks Ambulance Association may deny your request. However, in the unlikely event that this occurs, the Western Berks Ambulance Association will work with you to identify an alternative accommodation that allows you to effectively participate in Western Berks Ambulance Association programs, activities, or services.

7. May Western Berks Ambulance Association request medical documentation from you after receiving your request for a reasonable accommodation?

- No, Western Berks Ambulance Association may not request medical documentation after receiving your request for a reasonable accommodation. The Western Berks

Ambulance Association's questions will be limited to understanding the barrier to your ability to participate in the program or activity in which you are interested and the nature of an accommodation that will remove this barrier.

8. May Western Berks Ambulance Association charge you the cost of providing the reasonable accommodation?

- No, you are not responsible for the cost of an auxiliary aid or service the Western Berks Ambulance Association provides to you.

9. What are some examples of reasonable accommodations?

- There are many types of reasonable accommodations. Some examples of how Western Berks Ambulance Association provides reasonable accommodations include:
 - Arranging for qualified sign language interpreters
 - Producing alternate formats of print materials in braille, large print, all languages on the "I Speak ..." Point to Your Language Card", or in an electronic format
 - Providing remote conference captioning services
 - Furnishing a temporary ramp to access areas with one or more stairs to ensure accessibility for individuals who have physical disabilities and may be using a wheelchair or walker.

Item 8:

Provide copies of the recipient's policy and procedures regarding the requirement to provide meaningful access to programs and services to individuals with limited English proficiency (LEP).

Please see the attached Western Berks Ambulance Association "Limited English Proficiency (LEP) Plan".

- *The Western Berks Ambulance Association "Limited English Proficiency (LEP) Plan" is attached for reference in Appendix 5*

Based upon the results of the LEP Plan, we have posted the "Reasonable Accommodations for Individuals with Disabilities" Notice in our stations and on the Western Berks Ambulance Association website which lists examples of reasonable accommodations, to include:

- Arranging for qualified sign language interpreters
 - Producing alternate formats of print materials in braille, large print, all languages on the "I Speak ..." Point to Your Language Card", or in an electronic format
 - Providing remote conference captioning services
 - Furnishing a temporary ramp to access areas with one or more stairs to ensure accessibility for individuals who have physical disabilities and may be using a wheelchair or walker.
-



**Western Berks
Ambulance Association**

2506 Belmont Avenue
West Lawn, PA 19609-1535

EMERGENCY TELEPHONE
911

BUSINESS TELEPHONE
610-678-1545

FAX NUMBER
610-670-3783



Appendix 2

Western Berks Ambulance Association

Department of Homeland Security
Civil Rights Evaluation Tool

Commendation / Complaint Form



Western Berks Ambulance Association

2506 Belmont Avenue
West Lawn, PA 19609-1535



EMERGENCY TELEPHONE
911

BUSINESS TELEPHONE
610-678-1545

FAX NUMBER
610-670-3783

Commendation / Complaint Form

Reporting Party's Name: _____ Ph#: _____

Address: _____ Email: _____

Witness: _____ Ph#: _____

Witness: _____ Ph#: _____

Witness: _____ Ph#: _____

Type of Incident: _____

Location of Incident: _____

Date of Incident: _____ Time of incident: _____

Officer / Personnel Involved (if known): _____

Nature of Commendation or Complaint (Briefly state the nature of the commendable action or complaint. What is it that one or more of our members did, or failed to do? What were the conditions or circumstances at the time of the incident, and what resulted?):

Additional page(s): Yes / No

_____ Signature of Reporting Party _____ Date

ACKNOWLEDGEMENT OF RECEIPT		
Received by: _____	Date: _____	Time: _____



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Appendix 3

Western Berks Ambulance Association

Department of Homeland Security
Civil Rights Evaluation Tool

**Language Identification Guide
("I Speak ..." Point to Your Language Card)**



LANGUAGE IDENTIFICATION GUIDE

أنا أتحدث العربية
I speak Arabic

Unë flas shqip

I speak Albanian

Ես խոսում եմ
հայերեն

I speak Armenian

**Mən AZƏRBAYCAN
dilində danışırım**

I speak Azerbaijani

Размаўляю па-
беларуску

I speak Belarusian

Govorim bosanski

I speak Bosnian

Аз говоря български

I speak Bulgarian

我说中文 (简体)

I speak Chinese (Simplified)

我會說中文 (繁體)

I speak Chinese (Traditional)

Govorim hrvatski

I speak Croatian

Mluvím česky

I speak Czech

Jeg taler dansk

I speak Danish

Ik spreek Nederlands

I speak Dutch

**Nagsasalita ako ng
Filipino**

I speak Filipino

je parle français

I speak French

ich spreche Deutsch

I speak German

Μιλάω ελληνικά

I speak Greek

**Mwen pale kreyòl
ayisyen**

I speak Haitian Creole

**Saya berbicara bahasa
Indonesia**

I speak Indonesian

Labhraím Gaeilge

I speak Irish

io parlo italiano

I speak Italian

私は日本語を話します

I speak Japanese

나는 한국어를 할 줄 안다

I speak Korean

Es runāju latviski

I speak Latvian

Kalbu lietuviškai

I speak Lithuanian

မြန်မာစကားပြောတယ်

I speak Myanmar (Burmese)

Jeg snakker norsk

I speak Norwegian

زه په پښتو خبرې كوم

I speak Pashto

من فارسی صحبت می کنم

I speak Persian

Ja mówię po polsku

I speak Polish

eu falo português

I speak Portuguese

vorbesc romaneste

I speak Romanian

Я говорю по-русски

I speak Russian

Ou te tautala Samoa

I speak Samoan

Ja говорим српски

I speak Serbian



I speak Sign Language
SEE CHART ON BACK

Hovorím po slovensky

I speak Slovak

Govorim slovensko

I speak Slovenian

**waxaan ku hadlaa
somali**

I speak Somali

Yo hablo español

I speak Spanish

**Abdi nyarios basa
Sunda**

I speak Sundanese

jag pratar svenska

I speak Swedish

ฉันพูดภาษาไทย

I speak Thai

**ben Türkçe
konuşuyorum**

I speak Turkish

**Я розмовляю
українською**

I speak Ukrainian

tôi nói tiếng Việt

I speak Vietnamese

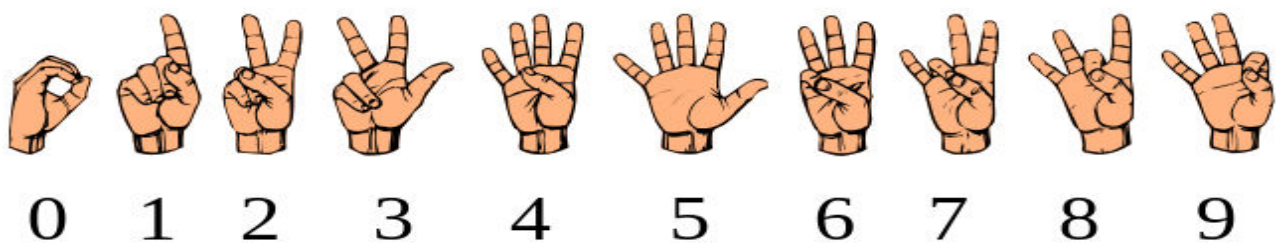
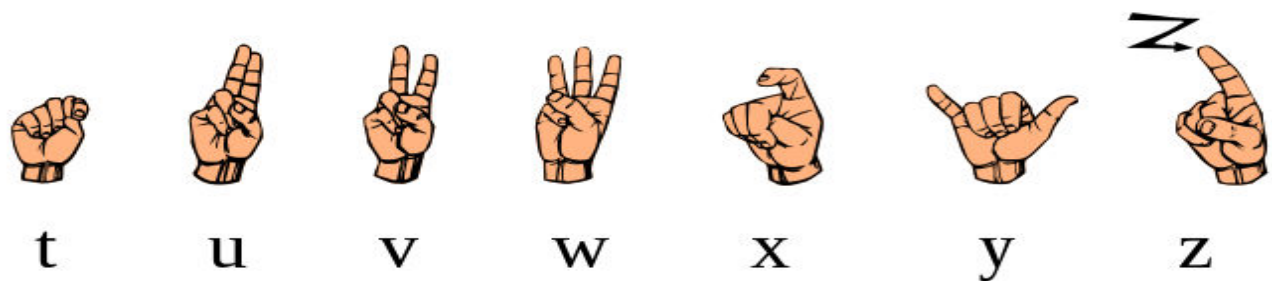
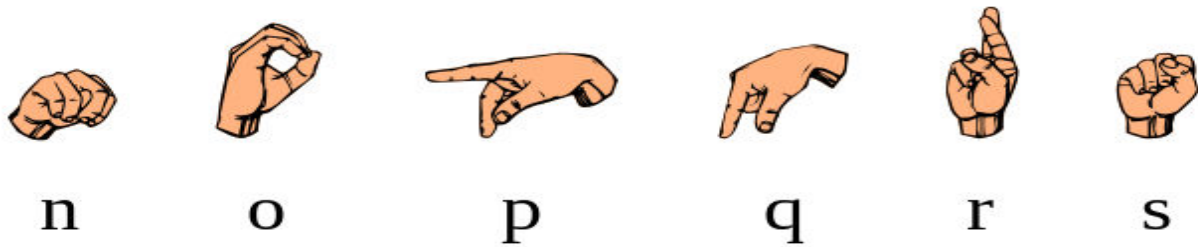
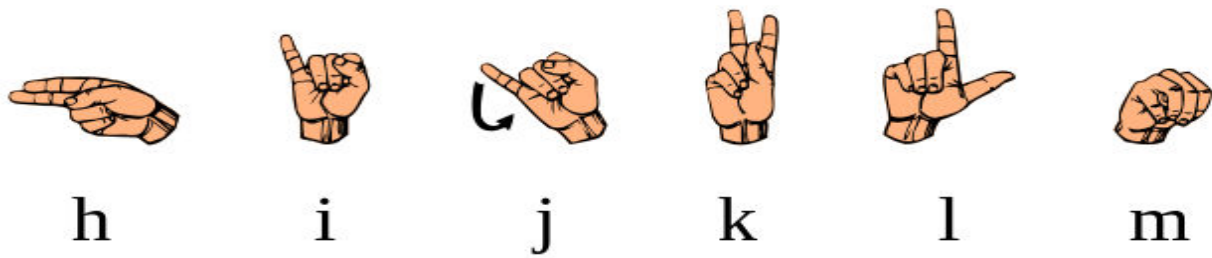
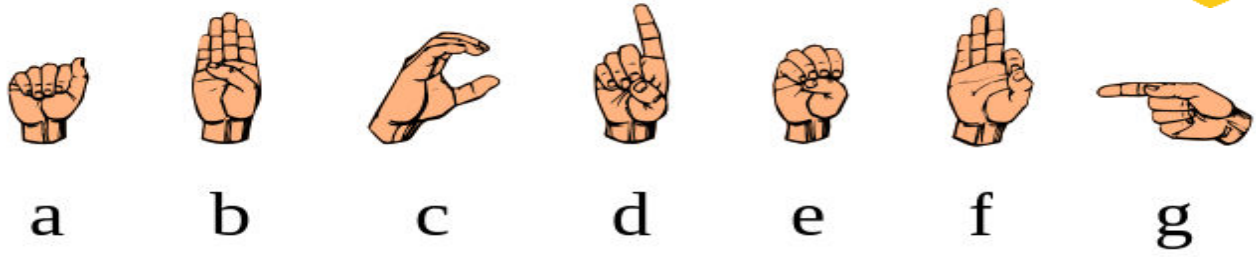
איך רעד יידיש

I speak Yiddish

WESTERN BERKS AMBULANCE ASSOCIATION



AMERICAN SIGN LANGUAGE ALPHABET





**Western Berks
Ambulance Association**

2506 Belmont Avenue
West Lawn, PA 19609-1535

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Appendix 4

Western Berks Ambulance Association

Department of Homeland Security
Civil Rights Evaluation Tool

**Berks County Department of Emergency Services
Department Standard Operating Procedure #
02.04.01.18002**

and

**Quality Assurance Standard Evaluation Guidelines
v.08/2018**

BERKS COUNTY

DEPARTMENT OF EMERGENCY SERVICES

Department Standard Operating Procedure # 02.04.01.18002

Date: October 22, 2018 **Revised/Reviewed:** October 22, 2018
Subject: Emergency Call Handling Process
Authorization: Sean L. Hart **Effective Date:** October 22, 2018
Supersession: SOP 02.04.01.18001

Scope: This policy sets forth the process and guidelines for all call handling within the Berks County, Department of Emergency Services 911 Center (the Center).

Definitions: **Automatic Location Identification (ALI):** An enhanced electronic location system that automatically relays a caller's address when they call an emergency responder service such as 911, whether they call from a mobile phone or a land line.

Automatic Number Identification (ANI): A system utilized by telephone companies to identify the DN (Directory Number) of a calling subscriber.

Emergency Call: Any call received over a 911 or 10-digit emergency line or a text message indicating a need or request for service, received by the PSAP.

Public Safety Answering Point (PSAP): a facility equipped to receive emergency calls requesting police, fire, emergency medical and other public safety services via telephone and other communication devices. A primary PSAP is the first communications center to answer a 9-1-1 call; it may also be the point from which calls are dispatched.

Teletypewriter/Telecommunications Device for the Deaf (TTY/TDD): An electronic device for text communication over a telephone line, that is designed for use by persons with hearing or speech difficulties.

Policy: All emergency calls that enter the center shall be documented on a Call for Service (CFS). (This includes, but is not limited to, calls for PSP and RPD)

The priority for handling calls will be:

1. 911,
2. 10-digit emergency phone lines, and text messages
3. Administrative, non-emergency, and internal extensions

Procedure:

Call Takers will have the primary responsibility of answering emergency calls and text messages. If they are unavailable, it is the responsibility of the radio operators to answer and handle emergency calls.

Radio operators will have the primary responsibility for answering non-emergency or administrative lines.

Telecommunicators shall follow the **All Callers Interrogation** process to obtain and document the following for all emergency calls:

1. Geo-verified location of emergency
 - a. Address point
 - i. This may extend to the parcel if there is no perceived advantage to pinning the call
 - b. Commonplace name
 - i. Commonplace names may be used for mile markers, trails, railways, and buildings
 - ii. Commonplace names beginning with REF shall only be used as a reference point and not to geo-verify and address
 - iii. Interchanges shall be pinned to the correct location
 - c. Centerline address
 - d. Intersections
 - i. Intersections where there is a run card or municipal boundary shall be pinned to the correct location
 - e. Or map pinned location
 - i. The venue and the call location shall be included in the Additional Location field for all pinned calls.

2. Municipality
 - a. All specific location information shall be placed in the Additional Location field.
3. Nature of Call/Call Type
4. Caller's name and phone number

No emergency call shall be placed on hold to answer another call until the **All Callers Interrogation** is completed.

All wireless calls will be rebid at least once to attempt to gain more accurate location. The Call Taker must pause a minimum of 15 seconds from the start of the call and between each rebid request.

The Telecommunicator will follow the Standard Evaluation Guidelines (SEGs) (Appendix A) to gain appropriate information for all emergencies being handled with resources being dispatched by the Center.

It is the Call Takers responsibility to ensure that:

1. All Callers Interrogation information is obtained and documented accurately
2. Appropriate Call Type has been selected
3. Ready for Dispatch box is checked
 - a. An alarm will sound, at all Call Taker's positions, if the Ready for Dispatch button has not been clicked within 15 seconds of assigning a call type to a Critical and High priority call. The timer will be one minute for lower priority calls.
4. The call has left the Unfinished (False) Call box

The Radio Operators will confirm that necessary address information is located in the Additional Location field and that the Call Type selected is appropriate for the Nature of Call and available narrative.

Foreign Language Callers

Routinely we will be called upon to provide service to those who are unable to speak English or feel more comfortable using their native language. If the caller is unable to easily answer the **All Callers**

Interrogation, due to a language barrier, immediately obtain assistance using the following aides.

1. If there is a bilingual Call Taker immediately available, for the caller's language, they may take over the call.
2. If there are no bilingual Call Takers immediately available, utilize the interpretation service.

Premise Alerts

It is the responsibility of the Call Taker and all involved Radio Operators to check Alerts tab (if indicated) and ensure that pertinent information is relayed to responders.

Changes in Call Types/Upgrading Calls

If the Call Type needs to be changed, additional disciplines may need to be activated. Inactive disciplines will be shown with parentheses around the Call Type. If you are changing from a police-only Call Type to one requiring EMS, make the change and then click on the inactive discipline to activate it.

Call Takers shall not change the Call Type on any CFS that is made Ready for Dispatch. If subsequent information dictates a Call Type change, it shall be documented as Critical Narrative in the CFS and the Radio Operator shall be alerted to adjust the Call Type and Disciplines.

Multiple Calls for the Same Incident

The Call Taker will obtain the All Callers Interrogation information.

For emergencies with multiple callers reporting the same event, the caller information can be added to the people tab and any relevant additional information shall be added to the narrative of the CFS being used for dispatch.

If a separate CFS, has already been created, it may be associated with the original call.

Associated Calls

CFS that are related to the same incident may be associated. CAD will automatically recommend associating calls that are geo-verified within a defined area.

Emergencies that have not had units dispatched shall only be associated by the radio operator.

Once units have been dispatched on the CFS, it is the call takers responsibility to associate calls with the active CFS.

The narrative and people information will transfer to the associated call. The nature of call will not.

It is important to remember that at no time shall any employee open a CFS that has units dispatched on it and attempt to associate it with another call. Doing so will clear all the dispatched units from the detail. ***Simply put, the call you are looking at will be the one that goes away.***

Call Transfers for Emergency Calls

Calls where no resources will be dispatched from the Center.

1. The Call Taker shall follow the All Callers Interrogation process and determine the appropriate dispatch center, PSAP, or Secondary PSAP that should receive the call.
2. For scenarios covered under Scripted Medical Instructions and Severe Bleeding, the Call Taker shall begin providing EMD instructions while transferring the call. If circumstances require a decision to be made between facilitating the transfer or providing life-saving EMD, the Call Taker shall place the emphasis on EMD.
3. The Call Taker will then transfer the call to the appropriate receiving agency and hand off the call by announcing, "This is Berks with a transfer." (or similar greeting), providing the information obtained from the All Callers Interrogation, and any other pertinent information obtained during the call.
4. If the call cannot be transferred, the Call Taker will facilitate notification of the appropriate receiving agency of the need for resources and retain the call until it can be released per procedure or resources arrive on scene.
5. Once the receiving Telecommunicator has acknowledged the information and has begun their own call taking procedure, the Call Taker may disconnect the line.

6. The Call Taker will then dispatch the CAD unit for the appropriate dispatch center, PSAP, or Secondary PSAP onto the call, clear them, and mark the disposition as a Transfer to Other Agency.

Calls where resources will be dispatched from the Center

1. The Call Taker will follow the process for Emergency Calls.
2. The Radio Operator for the needed resources' discipline will be responsible for dispatching and notifying the appropriate dispatch center of the need for resources.
 - a. No outside agency units will be CAD dispatched until there is appropriate notification to their responsible dispatch center.
 - b. The County Fire/EMS Pod will be responsible for notifying for Fire and EMS resources.
 - c. The appropriate PD agencies will be notified by the County PD Pod.
 - d. Reading Police notification shall be the responsibility of the County PD Pod for the following call types:
 - i. Assault/Fight Injury
 - ii. SWAT/Bomb Threat Standby
 - iii. Class 4 Mental
 - iv. Class 5
 - v. Domestic Injury
 - vi. all MVA types
 - vii. Overdose
 - viii. Shooting
 - ix. Stabbing
 - x. Suicide

- xi. Whenever additional information that has been received, after the initial dispatch has been completed, indicates that conditions on scene are now more similar to an above call type requiring PD notification (e.g. An ALS Trauma was dispatched for EMS only, but new information causes DES to believe the injury is domestic related).
 - e. **Police units shall not be CAD-dispatched to a fire or EMS call until a fire or EMS unit has been dispatched and is visible in the “Units” column on the PD Pending window** (This is not intended to prevent the Radio Operator from initiating a prompt voice dispatch).
 - i. Failure to follow this process may cause a police unit to clear the call and delay the dispatch of resources.
3. If conditions change while units are responding, or responding units request a PD presence, the Radio Operator will document the request as Critical Narrative and reactivate the PD portion of the CFS. The PD Radio Operators will be responsible for dispatching or notifying the appropriate agencies.

Implementation:

Immediately upon release

Berks County Department of Emergency Services
Quality Assurance Standard Evaluation Guidelines v.08/2018

Location Verification/Confirmation

Properly obtains incident location, municipality and county prior to making call ready for dispatch – Telecommunicator obtains a geo-verifiable location depending on incident location or common place name. A geo-verifiable location is an address point, common place name, centerline address, or a pinned location.

Telecommunicators will verify ANI/ALI screen for all 9-1-1 calls by having the caller provide the address, municipality and phone number and verifying it against the information displayed on the ANI/ALI screen. This information is to be documented on the CFS in the appropriate fields. In the event of any ANI/ALI screen discrepancy, an incorrect ALI report will be completed and printed.

Telecommunicators will verify caller's location, municipality, and county on all 911 wireless calls. All wireless calls will be rebid at least once 15 seconds after start of the call to gain a more accurate location.

Geo-verifying – Telecommunicator obtains or attempts to obtain and properly geo-verifies the CFS to the location where the incident occurred. Telecommunicator verifies and selects the appropriate common name when multiple names display. If location is a common place and does not geo-verify in the location field, Telecommunicator documents establishment, business, school, etc. in the Additional Information Field.

Pinning - Telecommunicator properly documents venue, location information, & business or residence name of pinned locations in Additional Information Field. Common place names for roadways and railways are location reference points only. All calls involving these areas must be pinned.

Note: if incident location is not the address of the caller, call will be pinned to ensure correct run response.

Telecommunicator obtains callers first and last name – Telecommunicator will obtain the first & last name, and title if applicable, for all callers reporting an incident.

Telecommunicator obtains callers phone number – Telecommunicator will obtain phone number for calling party and document in the appropriate field. This number should be a number the calling party can be reached at in the event we must contact them or a field user can contact them, and should include extensions if applicable. Call-back number is correctly documented on the CFS.

Telecommunicator properly reconfirms incident location and municipality prior to making call ready for dispatch – Prior to making call ready for dispatch or transferred, telecommunicator will reconfirm incident location, municipality, common place name, and

incident type reported. Once confirmed, call can be made ready for dispatch. When reconfirming, the Telecommunicator will read the incident location, municipality, and incident type back to the caller and have them acknowledge the information is correct.

Transfers to Secondary PSAPs and other Counties – Telecommunicator will properly announce information on call origin, location, and incident being reported. Telecommunicator will confirm that caller and receiving party have been connected prior to disconnecting the call.

Properly determines caller's relationship and documents on CFS - Telecommunicator documents caller's connection with the incident: relationship to patient, patient, involved party, third party caller, passerby, witness, etc.

Customer Service

Speaks in a clear and concise manner – Telecommunicator must speak in terms that are clear and a brief manner in which the callers are able to understand. Telecommunicator will utilize appropriate verbiage when asking questions.

Speaks tactfully and courteously – Telecommunicator must use professional verbiage and display a polite and professional demeanor towards callers, appropriate tone of voice and inflections must be used.

Demonstrates patience and understanding with callers – Telecommunicator must express patience and understanding to callers even when callers may be belligerent. Using appropriate tone of voice and words will assist in expressing understanding to callers.

Exhibits a calm and professional demeanor – Telecommunicator must remain calm, composed and display professionalism to all callers. Appropriate customer service must be provided to all callers on a professional level, Telecommunicator must remain calm in all situations.

Allows caller to speak without interruption – Telecommunicator should allow callers to complete sentences without interrupting when pertinent information is being provided. It is a Telecommunicator's job to gather information for appropriate dispatch of calls, appropriate control and questioning techniques must be utilized to complete this task.

Demonstrates active listening skills – Telecommunicator demonstrates an interest and understanding in what the caller is saying, remaining focused, asking questions, and listening for the main point. Basic techniques will be applied using open-ended questions, paraphrasing, and reflecting feelings.

Call Processing

Quickly and accurately determines nature of call – Telecommunicator must determine the nature of the call and process the call for dispatch within 60 - 90 seconds of receiving call.

Properly documents pertinent information in NOC field – Telecommunicator documents chief complaint in a brief and concise manner for all incidents. Content is not more than 127 characters. This information is received by field users via text page and should provide a brief overview of the incident.

Explains emergency actions to caller – When incident location, municipality, and type have been verified and confirmed, Telecommunicator advises caller help is being dispatched for the particular incident being reported. Telecommunicator will advise the caller prior to transfer of actions being taken when transferring to another PSAP.

Selects most appropriate Call for Service Type – Selects the most appropriate CFS type based on information documented on CFS

Telecommunicator controls conversation in order to obtain pertinent information – Telecommunicator must control the conversation and prevent the caller from rambling, providing unneeded information. Telecommunicator must utilize call control techniques.

Telecommunicator utilizes proper calming techniques when necessary – Telecommunicator utilizes persistent repetition, firm voice, and remain in control of the conversation in order to gather pertinent information.

Telecommunicator utilizes Teletypewriter (TTY) – Telecommunicator enables the TTY device on all open lines to determine if a TTY call is being received. Telecommunicator uses appropriate standard abbreviations when handling TTY calls.

Appropriately utilizes interpreter agency – Telecommunicators utilizes interpretation agency or qualified Telecommunicator designated to provide interpretation to assist with determining caller's needs.

Generates Call for Service – Telecommunicator documents all emergency calls on a Call for Service (CFS) including calls for Reading Police Department (RPD), Pennsylvania State Police (PSP), and out of county. This process will include any call directly transferred or relayed information.

Police

Weapons and type of weapons – Telecommunicator must attempt to determine if there are any weapons present, and type of weapons.

Alcohol and drugs – Telecommunicator must attempt to determine if any alcohol or drugs were used and what type if known.

Physical or verbal – Telecommunicator must attempt to determine if there is a physical or verbal altercation.

Determines if EMS is needed – Telecommunicator must inquire if EMS is needed at the incident and if so, what type of injuries.

Obtains direction of travel – Telecommunicator must attempt to obtain a direction of travel for the actor(s).

Obtains mode of travel – Telecommunicator must attempt to determine mode of travel if actor left scene (i.e. on foot, vehicle, bike, etc.).

Inquires how many actors involved – Telecommunicator must attempt to determine number of individuals involved.

Obtains description of actor(s) involved – Telecommunicator must attempt to obtain any physical descriptors, race, sex, age, height, weight, hair color/style, and clothing description of individuals involved.

Obtains vehicle description - Telecommunicator must attempt to obtain vehicle descriptors, color, year, make/model, body, additional descriptors, registration.

Inquires about actor(s) location – Telecommunicator questions caller appropriately to determine actor's location and continues to obtain updates. Telecommunicator obtains specific location of caller and their proximity to the actor or involved parties.

Inquires about time lapsed – Telecommunicator must determine if the incident is in-progress or how long ago it occurred.

Additional Location Specifics - Telecommunicator obtains specific location of caller and their proximity to the actor or involved parties

Utilizes proper questioning to gather other pertinent information – Telecommunicator must gather all pertinent information related to an incident, utilizing proper information gathering techniques. All pertinent information must be documented on the CFS.

Fire

Inquires about hazardous materials – Telecommunicator must attempt to determine if hazardous materials are involved and type. Telecommunicator will inquire and document about placards/markings.

Determines if structure is residential/commercial/out building – Telecommunicator obtains information on involved structure.

Instruct occupants to evacuate structure – Telecommunicator advises occupants reporting a structure fire or any hazardous condition that can cause harm to evacuate the structure to a safe location.

Attempts to determine entrapment and location of occupants if possible – Telecommunicator must attempt determine if there are any individuals trapped inside building and attempt to obtain their location in the structure.

Attempts to determine if other exposures are threatened – Telecommunicator attempts to determine if there are any exposures threatened for the reported incident. This shall include approximate distance from threat, and type of exposure and appropriately documents information as part of the call narrative.

Attempts to determine if there is a carbon monoxide problem (i.e. Symptoms, type of heat) – Telecommunicator appropriately questions the caller about type of symptoms present, type of heat, carbon monoxide detectors, when a carbon monoxide problem is suspected. Any carbon monoxide incident having a detector with a digital display/read out, Telecommunicator will obtain and document the displayed reading. If suspected carbon monoxide incident, Telecommunicator appropriately instructs caller to evacuate to a fresh air environment. Telecommunicator instructs caller to keep all windows and exterior doors closed after they safely evacuate.

Utilizes proper questioning to gather other pertinent information – Telecommunicator must gather all pertinent information related to an incident, utilizing proper information gathering techniques. All pertinent information must be documented on the CFS.

EMS / EMD

Follows EMD guide card questions – Telecommunicator must follow EMD guide cards in order, asking all questions pertinent to the patient, to assist in determining ALS/BLS protocols.

Provides Pre –Arrival Instructions when applicable – Telecommunicator provides all pre- arrival instructions to callers, unless approved medically trained staff identified in our APCO EMD Guide Cards is on location.

Properly document PAI – Telecommunicator must properly document when pre-arrival instructions have been given, by documenting PAI given on the CFS or PAI N/A if call is 3rd party call and caller is not with the patient.

Inquires if medically trained staff is on location – Telecommunicator must inquire at all medical or residential care facilities if there is a physician, physician assistant (PA), registered nurse (RN), licensed practical nurse (LPN), or nurse practitioner (NP) on location.

Properly obtains information for infectious illnesses – Telecommunicator follows policy by asking the appropriate questions related infectious illnesses.

Properly documents EPI/EPNI on CFS – Telecommunicator must properly document EPI/EPNI on CFS after following appropriate questioning for infectious illnesses.

Patient location – Properly obtains and documents the patient's specific location

Business location – i.e. deli vs. aisle 4 in a grocery store and specific entrance to use

Residential location – patient's location either inside or outside. Inquires if door is unlocked and documents information on the CFS, advises caller to turn on the outside light.

Medical Facility or care home – Entrance number, door number, room number, etc.

Utilizes proper questioning to gather other pertinent information –

Telecommunicator must gather all pertinent information related to an incident, utilizing proper information gathering techniques. All pertinent information must be documented on the CFS.



**Western Berks
Ambulance Association**

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911

BUSINESS TELEPHONE
610-678-1545

FAX NUMBER
610-670-3783



Appendix 5

Western Berks Ambulance Association

Department of Homeland Security
Civil Rights Evaluation Tool

Limited English Proficiency (LEP) Plan

Western Berks Ambulance Association
LIMITED ENGLISH PROFICIENCY (LEP) PLAN

Prepared for Calendar Year 2023

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Western Berks Ambulance Association
Limited English Proficiency Assessment

Title VI of the 1964 Civil Rights Act states that “No person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, or denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.”

Federal Executive Order 13166 of 2001 “Improving Access to Services for Persons with Limited English Proficiency” directed federal agencies to: a) publish guidance on how their recipients can provide access to persons with limited English proficiency; b) improve the language accessibility of their own federal programs; and c) break down language barriers by implementing consistent standards of language assistance across federal agencies and amongst all recipients of federal financial assistance.

“Limited English Proficient” or “LEP” persons are those individuals who do not speak English as their primary language, and who have a limited ability to read, speak, write or understand English. The key commonality among all LEP persons is their inability to communicate effectively in the English language, regardless of their native tongue. Persons who are multi-lingual, in that they speak a language *in addition to English*, are not considered to be Limited English Proficient.

As a recipient of federal financial assistance, the Western Berks Ambulance Association has an obligation to reduce language barriers that can preclude meaningful access to Western Berks Ambulance Association’s programs, information and services by non-English speakers. The first step is the completion of a “Limited English Proficiency Self-Assessment” or LEP Assessment.

This self-assessment is designed to balance four factors:

1. The number or proportion of LEP persons eligible to be served or likely to be encountered by the program or service,
2. The frequency with which LEP individuals come in contact with the program and/or activities,
3. The nature and importance of the program, activity, or service provided to people’s lives, and
4. The resources available to the federal financial recipient and costs.

1. LEP Population

The LEP self-assessment begins with the identification of the potential LEP population through a demographic analysis to determine the number or proportion of LEP persons from a particular language group served or likely to be encountered in the eligible service area. The greater the number or, the higher the proportion of LEP persons served or encountered, the more likely language services are needed.

American Community Survey (ACS)

After the 2000 Census, Congress directed the Census Bureau to devise a method to collect the same information in a timely manner while saving costs related to the Decennial counts. The resulting American Community Survey is a monthly nationwide survey taken of roughly 3 million households per year, with data aggregated for particular time frames based on geographic populations. Areas with populations over 65,000 persons receive their data aggregated to a one-year time span. Areas with populations between 20,000 and 64,999 (larger townships, plus one-year areas) receive three years' worth of aggregated data, while areas with less than 20,000 persons (boroughs, most townships, plus 1- and 3-year areas) receive their data aggregated over five years.

Since information needs to be reviewed at the municipal level, the most recent data to be used is from the 2017-2021 American Community Survey.

The Western Berks Ambulance Association Service Area

The "service area" for the Western Berks Ambulance Association consists of the Boroughs of Sinking Spring, West Reading, Wernersville, Robesonia, Womelsdorf, and Wyomissing. As well as the Townships of Spring, South Heidelberg, and Lower Heidelberg. "Service area" is defined as the primary response area for the Western Berks Ambulance Association. According to the 2017-2021 American Community Survey (ACS), the population (Age 5+ years) of the service area was approximately 65,627 persons.

Information on the ability of residents of the Western Berks Ambulance Association service area to speak English was also obtained from the Census Bureau's 2017-2021 ACS. The particular language information obtained lists the number of speakers of more than one language other than English. The data are based on responses to the question, "Does this person speak a language other than English at home?" on the ACS questionnaire, which was distributed annually to approximately 1-in-46 households nationwide. Respondents who answered in the affirmative were then asked to name the language they spoke.

Western Berks Ambulance Association's service area data indicates that approximately 56,156, or 85.57%, persons speak only English, leaving 9,471, or 14.43%, (Age 5+ years) residents who speak a language other than English. 7,096, or 74.92%, of these individuals were multi-lingual in that they indicated that they spoke English "Very Well" in

addition to speaking another language. *These persons are not Limited English Proficient, or LEP, and were excluded from further analysis based on their ability to communicate effectively in English.*

The Western Berks Ambulance Association’s LEP resident population speak more than 36 different languages, with Spanish, Other Indo-European Languages, and Asian and Pacific Island Languages being the 3 language types most commonly spoken.

Exhibit 1 identifies the following:

- Western Berks Ambulance Association’s service area total population (5+ years and older)
- Other-than-English Languages spoken at home
- Estimated number and corresponding percentage of Other-Than-English speakers (5+ years and older)
- Estimated number and corresponding percentage of Other-Than-English speakers (5+ years and older) that speak English “Very Well”
- Estimated number and corresponding percentage of Other-Than-English speakers (5+ years and older) that DO NOT speak English “Very Well”
 - These individuals are the identified Limited English Proficient (LEP) population for the service area of Western Berks Ambulance Association

Exhibit 1						
Western Berks Ambulance Association						
Service Area Total Population (5+ years and older)					65,627	
Language	Estimated # of Other-Than-English (≥ 5 yrs old)	Corresponding Percentage of Total Population	Estimated # that speaks English “Very Well”	Corresponding Percentage of Total Population	Estimated # that DO NOT speak English “Very Well”	Corresponding Percentage of Total Population
All Languages	9,471	14.43%	7,096	10.81%	2,375	3.62%
Spanish	5,221	7.96%	3,827	5.83%	1,394	2.12%
Other Indo-European Languages	3,017	4.60%	2,459	3.75%	558	0.85%
Asian and Pacific Island Languages	677	1.03%	418	0.64%	259	0.39%
Other Languages	556	0.85%	392	0.60%	164	0.25%

2. Frequency of Contact

The more frequent the contact with a particular language group, the more likely that enhanced language services are needed. If an LEP person from a specific language group accesses a program or service on a daily basis, the federally funded agency has greater language assistance requirements than if the same person’s frequency of contact with the program or service is unpredictable or infrequent. However, federal aid recipients must bear in mind the possibility that the frequency of contact with LEP

populations could increase when appropriate outreach to those LEP populations is enhanced.

The next factor to be considered in the LEP Assessment is the frequency with which LEP persons encounter the services and programs of the Western Berks Ambulance Association.

The Western Berks Ambulance Association provides emergency medical services in the Boroughs of Sinking Spring, West Reading, Wernersville, Robesonia, Womelsdorf, and Wyomissing. As well as the Townships of Spring, South Heidelberg, and Lower Heidelberg, along with a limited number of community outreach programs. Decisions made by Western Berks Ambulance Association affect all residents of the service area. As residents of the region, LEP persons may be affected by the decisions, services, and community outreach programs of Western Berks Ambulance Association. Public input is sought in the development and advancement of the limited number of community outreach programs and initiatives offered by Western Berks Ambulance Association. The limited finances of Western Berks Ambulance Association, a non-profit organization, dictate the availability and type of community outreach programs offered by Western Berks Ambulance Association. To date, no comments or requests for information have been received in a language other than English, nor has any advocacy group informed Western Berks Ambulance Association of the need for expanded outreach in any language other than English.

3. Importance of Services Provided

Once the languages spoken by LEP persons in the service area have been identified, and the frequency of contact has been analyzed, the nature and importance of the services provided must be assessed. As a rule of thumb, the more important the activity, service or program, or the greater the possible consequences of the contact to the LEP individuals, the more likely language services are needed. The key question to be addressed is “will the denial or delay of access to services have serious implications for the LEP individual?”

The nature of the emergency medical services provided by Western Berks Ambulance Association impacts the safety of persons and property within the service area. However, as noted in Item 7 of the Civil Rights Evaluation Tool, the Western Berks Ambulance Association does not provide the service of initially receiving emergency requests for service or dispatching the appropriate emergency services (police, fire, and/or EMS) based upon the initial receipt of the requested service ie, 911 call center and dispatching service. Specifically, the Berks County Communications Center is responsible for those services. The specific policies and procedures do not fall under the purview of the Western Berks Ambulance Association. However, the Berks County Communications Center has sufficient safeguards in place to ensure that LEP persons can immediately communicate the nature of the emergency through the use of translation services and TDD or TTY communication devices.

Upon being dispatched by the Berks County Communications Center to respond to an emergency location, the Western Berks Ambulance Association will be notified of an LEP reporting party. The Western Berks Ambulance Association will immediately respond to the location and render the appropriate emergency service. If necessary for immediate communication with an LEP reporting party or recipient of emergency services, the Western Berks Ambulance Association will establish communication with the Berks County Communications Center for continued communication through the use of translation services and TDD or TTY communication devices.

If exigent communication is not required for life and property preservation, the Western Berks Ambulance Association will use the Language Identification Guide (“I Speak ...” Point to Your Language Card), referenced in Item 5, along with the interactive written and audio translation program with all languages identified on the Language Identification Guide available on Western Berks Ambulance Association vehicles that are equipped with a cellphone, tablet, or computer with internet access, also reference in Item 5. The Language Identification Guide (“I Speak ...” Point to Your Language Card) and the interactive written and audio translation program is available for installation and use on personally-owned cellphones and tablets of Western Berks Ambulance Association personnel.

No element of the Western Berks Ambulance Association community outreach programs requires the compulsory participation of area residents, nor does Western Berks Ambulance Association administer or oversee any programs or services that impose involuntary restrictions on area residents. Finally, the delay or denial of Western Berks Ambulance Association community outreach programs is unlikely to result in an immediately detrimental effect on the health or well-being of any individual.

However, Western Berks Ambulance Association will take reasonable steps to ensure that LEP persons have meaningful access to community outreach programs when requested.

4. Resource Availability and Cost

Finally, the assessment of language service provisions has to assess the costs of providing such services, and the limited financial resources available to the Western Berks Ambulance Association. Western Berks Ambulance Association has assessed its available resources that could be used for providing language assistance. This includes identifying any multi-lingual staff members that are readily available and how much a professional interpreter and translation service would cost.

Language Assistance Obligations by Western Berks Ambulance Association

Language Assistance Measures

There are two language assistance services that Western Berks Ambulance Association will provide: translation and interpretation. These terms are often used interchangeably; however, they are actually quite distinct and there are different rules for each.

- **Translation** refers to the process of transferring information expressed in writing from one language to another language.
- **Interpretation** is the process by which the spoken word is used when transferring meaning between languages.

In order to determine in which languages these assistance measures will be provided by Western Berks Ambulance Association depends on the results of data that were analyzed as part of the 4-Factor LEP Assessment. The results of this assessment are shown in Exhibit 1 and indicate that there are approximately 65,627 residents in the Western Berks Ambulance Association service area. Of the total population, 9,471, or 14.43%, speak a language Other-Than-English at home.

Given the number and percentage of non-English speakers in the service area of Western Berks Ambulance Association, the potential need to provide services in as many as 36 languages could be problematic. To help agencies such as Western Berks Ambulance Association, whose service area include multiple language needs, the Department of Justice and the Department of Transportation have guidance on serving LEP populations that identify “safe harbor” provisions that recommend that language assistance be provided when the LEP population reaches one percent of the population in the service area, or when the number of non-English speakers with a common native language reach 1,000 persons, whichever is less. At these levels, the federal guidance recommends that written translation of vital documents be available upon request, and that the agency have plans to address the potential need for oral translation services.

Further LEP analysis of ACS data for the Western Berks Ambulance Association’s service area, shows that:

- Spanish language speakers that DO NOT speak English “Very Well” are estimated at approximately 1,394 persons, 2.12% of the total service area population.
- Other Indo-European Languages speakers that DO NOT speak English “Very Well” are estimated at approximately 558 persons, 0.85% of the total service area population.
- Asian and Pacific Island Languages speakers that DO NOT speak English “Very Well” are estimated at approximately 259 persons, 0.39% of the total service area population.
- Other Languages speakers that DO NOT speak English “Very Well” are estimated at approximately 164 persons, 0.25% of the total service area population.

All of the language groups are significantly below the “safe harbor” thresholds, with the exception of Spanish.

Written Translation

Western Berks Ambulance Association provides a translated copy of any printed material that is available to the general public upon request.

Western Berks Ambulance Association is in the process of adding the feature for On-Demand language translations of its website that will have the capability of translating any Western Berks Ambulance Association web page instantly into a number of languages, to include the Commendation / Complaint form.

Oral Interpretation

Oral interpretation services are appropriate for a number of situations that may involve Western Berks Ambulance Association. Western Berks Ambulance Association will continue to use the telephonic interpretation services provided by the Berks County Communications Center, and the use of the Language Identification Guide (“I Speak ...” Point to Your Language Card) as well as an interactive written and audio translation/interpretation program, with all languages identified on the Language Identification Guide, that is installed on all Western Berks Ambulance Association-owned cellphones, tablets, and computers with internet access.

Western Berks Ambulance Association’s Limited English Proficient Policy

Western Berks Ambulance Association has completed its assessment of Limited English Proficient Population in our service area and has identified all languages most frequently spoken by non-English speakers in our service area that are above the “safe harbor” threshold.

Western Berks Ambulance Association will continue to document all comments and/or requests to have information translated or interpreted into a language other than English. Additionally, Western Berks Ambulance Association will continue to document any and all requests from any advocacy group that informs Western Berks Ambulance Association of the need for expanded outreach in any language other than English.

Western Berks Ambulance Association will monitor and identify any language needs among the residents of our service area and take appropriate actions to amend this LEP Plan.