Title VI Plan Cover Page

Helping Ourselves Pursue Enrichment Incorporated

2026

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Title VI Plan Table of Contents

Executive Summary

HOPE is a Peer and Family Run Specialty Provider of Behavioral Health Services. Every employee at HOPE is either a peer or a family member who is dedicated to a unique model of service delivery that focuses on a team approach to recovery. We work in collaboration with each individual to create a plan that strives to meet their personal preferences and goals for wellness, recovery and integration.

HOPE's unique model of service delivery eliminates the role of a single individual managing someone's recovery goals (a 'Case Manager') and focuses on a team approach to recovery. All HOPE Members are assigned Recovery Teams, which are assembled in collaboration with the Member to purposefully honor the Member's preference of how they want their recovery to look and who they want involved. Transportation is provided to HOPE Inc. members across all our sites for a variety of reasons including to and from our locations, medically necessary appointments, support sessions and workforce training. This includes adult and elders living with a serious mental illness and/or substance use disorder using 5310 grant funding.

HOPE's service areas include Tucson and surrounding areas in Pima county, Nogales and surrounding communities in Santa Cruz County, Yuma and the surrounding community in Yuma County, Apache Junction and the surrounding areas in Pinal County, the majority of Cochise County served by our Sierra Vista and Douglas sites and in Yavapai County HOPE serves Prescott and surrounding areas including Cottonwood, Camp Verde as well as Show Low and surrounding areas. Through partnerships with ADOT, other agencies and insurance providers we have been expanding our services in the communities we serve and as part of that expansion, we have applied for and been awarded 5310 funds since 2014.

HOPE Inc. is overseen by a board of directors and services are driven by our leadership team. We have coordinators that oversee the programs that implement our vision and direct service staff to provide services the member identifies on their service plan. We have additional programs that are community based and meet with AHCCCS eligible members to reduce recidivism and ensure a warm handoff to behavioral health providers. These community programs support those leaving the criminal justice system, crisis services, and hospital evaluations.

What type of program fund(s) did you apply for?

☒ 5310
☐ 5311
☐ Other (please explain) _____

Type of Funding Requests? (Check all that apply)

☒ Vehicle Funds
☒ Operating Funds
☐ Other (please explain) _____

Is your agency a direct recipient of FTA funds?

☐Yes

☒No

Non Discrimination Notice to the Public

Notifying the Public of Rights Under Title VI and ADA
Helping Ourselves Pursue Enrichment Incorporated

Helping Ourselves Pursue Enrichment Incorporated operates its programs and services without regard to race, color, national origin or disability in accordance with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990 (ADA). Any person who believes she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with the **Helping Ourselves Pursue Enrichment Incorporated**.

For more information on the **Helping Ourselves Pursue Enrichment Incorporated**'s civil rights program, and the procedures to file a complaint, contact **Marc Haley, /Human Resource/Safety Manager**, **(520) 770-1197 EX: 1213**; **email marchaley@hopearizona.org**; or visit our administrative office at **877 S. Alvernon Way Tucson, AZ 85711**. For more information, visit **https://hopearizona.org.**

Complaints may be filed directly with the Arizona Department of Transportation **(ADOT) Civil Rights Office.** ATTN: Title VI Program Coordinator 206 S. 17TH Ave MD 155A RM: 183 Phoenix AZ, 85007 or with the Federal Transit Administration **(FTA).** ATTN: Title VI Program Coordinator, 1200 New Jersey Ave., SE Washington DC 20590

If information is needed in another language, contact **1-866-827-7028 Account Code: 7253**. *Para información en Español llame: **Irma Llamas, Fleet Manager, (520) 770-1197**

Non Discrimination Notice to the Public - Spanish

Aviso Público Sobre los Derechos Bajo el Título VI Y ADA
Helping Ourselves Pursue Enrichment Incorporated

Helping Ourselves Pursue Enrichment Incorporated *(y sus subcontratistas, si cualquiera)* asegura cumplir con el Título VI de la Ley de los Derechos Civiles de 1964, Sección 504 de la Ley de Rehabilitación de 1973 y La Ley de ciudadanos Americanos con Discapacidades de 1990 (ADA). El nivel y la calidad de servicios de transporte serán proveídos sin consideración a su raza, color, país de origen, o discapacidad.

Para obtener más información sobre el programa de Derechos Civiles de **Helping Ourselves Pursue Enrichment Incorporated**, y los procedimientos para presentar una queja, contacte **Marc Haley, /Human Resource/Safety Manager (520) 770-1197 EX: 1213**; o visite nuestra oficina administrativa en **877 S. Alvernon Way Tucson, AZ 85711**. Para obtener más información, visite **https://hopearizona.org**

Una queja puede ser presentada con la oficina de Derechos Civiles del Departamento de Transporte de Arizona **(ADOT)**. Atención: Title VI Program Manager, 206 S. 17th Ave MD 155A Phoenix AZ, 85007 o con la Administración Federal de Transporte **(FTA)**. Atención: Title VI Coordinator, 1200 New Jersey Ave., SE Washington DC 20590

The above notice is posted in the following locations: This information is posted in each vehicle and lobby of each site.

This notice is posted online at **https://hopearizona.org**

Non Discrimination ADA/Title VI Complaint Procedures

These procedures provide guidance for all complaints filed under Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990 (ADA) as they relate to any program or activity that is administered by **Helping Ourselves Pursue Enrichment Incorporated** including consultants, contractors and vendors. Intimidation or retaliation as a result of a complaint is prohibited by law. In addition to these procedures, complainants reserve the right to file a formal complaint with other State or Federal agencies or to seek private counsel for complaints alleging discrimination. Every effort will be made to resolve complaints at the lowest possible level.

(1) Any person who believes he and/or she has been discriminated against on the basis of race, color, national origin, or disability may file a Discrimination complaint by completing and submitting the agency's Title VI Complaint Form.

(2) Formal complaints must be filed within **180** calendar days of the last date of the alleged act of discrimination or the date when the alleged discrimination became known to the complainant(s), or where there has been a continuing course of conduct, the date on which the conduct was discontinued or the latest instance of the conduct.

(3) Complaints must be in writing and signed by the complainant(s) and must include the complainant(s) name, address and phone number. The ADA/Title VI contact person will assist the complainant with documenting the issues if necessary.

(4) Allegations received by fax or e-mail will be acknowledged and processed, once the identity of the complainant(s) and the intent to proceed with the complaint have been established. For this, the complainant is required to mail a signed, original copy of the fax or email transmittal for the complaint to be processed.

(5) Allegations received by telephone will be reduced to writing and provided to the complainant for confirmation or revision before processing. A complaint form will be forwarded to the complainant for him/her to complete, sign and return for processing.

(6) Once submitted **Helping Ourselves Pursue Enrichment Incorporated** will review the complaint form to determine jurisdiction. All complaints will receive an acknowledgement letter informing her/him whether the complaint will be investigated by the **Helping Ourselves Pursue Enrichment Incorporated** or submitted to the State or Federal authority for guidance.

(7) **Helping Ourselves Pursue Enrichment Incorporated** will notify the ADOT Civil Rights Office of ALL Discrimination complaints within 72 hours via telephone at 602-712-8946; or email at civilrightsoffice@azdot.gov.

(8) **Helping Ourselves Pursue Enrichment Incorporated** has 30 business days to investigate the complaint. If more information is needed to resolve the case, the Authority may contact the complainant. The complainant has 30 business days from the date of the letter to send requested information to the investigator assigned to the case. If the investigator is not contacted by the complainant or does not receive the additional information within 30 business days, the Authority can administratively close the case. A case can be administratively closed also if the complainant no longer wishes to pursue their case.

(9) After the investigator reviews the complaint, she/he will issue one of two letters to the complainant: a closure letter or a letter of finding (LOF). A closure letter summarizes the allegations and states that there was not a Discrimination violation and that the case will be closed. An LOF summarizes the allegations and the interviews regarding the alleged incident, and explains whether any disciplinary action, additional training of the staff member or other action will occur.

(10) A copy of either the closure letter or LOF must be also be submitted to ADOT within **72** hours of that decision. Letters may be submitted by hardcopy or email.

(11)A complainant dissatisfied with **Helping Ourselves Pursue Enrichment Incorporated** decision may file a complaint with the Arizona Department of Transportation **(ADOT)** or the Federal Transit Administration **(FTA)** offices of Civil Rights: **ADOT**: ATTN ADA/Title VI Program Coordinator 206 S. 17TH Ave MD 155A RM: 183 Phoenix AZ, 85007 **FTA**: Attention Title VI Program Coordinator, East Building, 5th Floor-TCR 1200 New Jersey Ave., SE Washington DC 20590

(12) A copy of these procedures can be found online at: **https://hopearizona.org.**

If information is needed in another language, contact **1-866-827-7028 Account Code: 7253**. *Para información en Español llame: **Irma Llamas, Fleet Manager, (520) 770-1197**

Discrimination ADA/Title VI Complaint Form

Section I:		
Name:		
Address:		
Telephone (Home):	Telephone (Work):	
Electronic Mail Address:		
Accessible Format Requirements?	☐ Large Print	☐ Audio Tape
	☐ TDD	☐ Other

Section II:		
Are you filing this complaint on your own behalf?	☐ Yes*	☐ No
If you answered "yes" to this question, go to **Section III.*		
If not, please supply the name and relationship of the person for whom you are complaining.		
Please explain why you have filed for a third party:		
Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party.	☐ Yes	☐ No

Section III:

I believe the discrimination I experienced was based on (check all that apply):

☐ Race ☐ Color ☐ National Origin ☐ Disability

Date of Alleged Discrimination (Month, Day, Year): _____

Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form.

_____

_____

_____

Section VI:		
Have you previously filed a Discrimination Complaint with this agency?	☐ Yes	☐ No

If yes, please provide any reference information regarding your previous complaint. _____ _____
Section V:
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court? ☐ Yes ☐ No If yes, check all that apply: ☐ Federal Agency: _____ ☐ Federal Court: _____ ☐ State Agency: _____ ☐ State Court : _____ ☐ Local Agency: _____
Please provide information about a contact person at the agency/court where the complaint was filed.
Name:
Title:
Agency:
Address:
Telephone:
Section VI:
Name of agency complaint is against:
Name of person complaint is against:
Title:
Location:
Telephone Number (if available):

You may attach any written materials or other information that you think is relevant to your complaint. Your signature and date are **required** below:

_____ _____

Signature Date

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

Helping Ourselves Pursue Enrichment Incorporated
Marc Haley, /Human Resource/Safety Manager
877 S. Alvernon Way Tucson, AZ 85711
(520) 770-1197 EX: 1213
marchaley@hopearizona.org

A copy of this form can be found online at **https://hopearizona.org**
If information is needed in another language, contact **1-866-827-7028 Account Code: 7253**. *Para información en Español llame: **Irma Llamas, Fleet Manager, (520) 770-1197**

Discriminación ADA / Formulario de Quejas del Título VI

Section I:		
Nombre:		
Dirección:		
Teléfono (Hogar):	Teléfono (Trabajo):	
Dirección de correo electrónico:		
¿Requisitos de formato accesibles?	☐ Letra grande	☐ Cinta de audio
	☐ TDD	☐ Otro
Section II:		
¿Está presentando esta denuncia en su nombre?	☐ Sí *	☐ No
* Si usted contesto "sí" a esta pregunta, vaya a la **Sección III**		
Si no, por favor proporcionar el nombre y la relación de la persona para quien se quejan		
Por Favor Explique por qué han presentado por un tercero:		
Por Favor confirme que ha obtenido el permiso de la parte agraviada si está presentando en nombre de una tercera parte	☐ Sí	☐ No
Section III:		
Creo que la discriminación que viví fue basada en (marque todos que aplican): ☐ Raza o Origen Étnico ☐ Color ☐ Origen nacional ☐ Discapacidad Fecha de presunta discriminación (mes, día, año): _____ Explicar lo más claramente posible lo que sucedió y por qué usted cree que fueron discriminados. Describir a todas las personas que participaron. Incluir el nombre e información de contacto de la persona que discriminó (si se conoce) así como los nombres y la información de contacto de cualquier testigo. Si necesita más espacio, utilice el dorso de este formulario. _____ _____ _____		
Section VI:		
¿Ha presentado anteriormente una denuncia de discriminación ante esta agencia?	☐ Sí	☐ No

En caso afirmativo, proporcione por favor cualquier información de referencia sobre su queja anterior. _____ _____
Section V:
¿Se presentó esta queja con cualquier otro Federal, estado o agencia local o con cualquier Tribunal Federal o estatal? ☐ Sí ☐ No Si es así, marque todo lo que corresponda: ☐ Agencia Federal: _____ ☐ Corte Federal: _____ ☐ Agencia del Estado: _____ ☐ Corte Estatal: _____ ☐ Agencia Local: _____
Sírvanse facilitar información sobre una persona de contacto en la Agencia/tribunal donde se presentó la queja.
Nombre:
Título:
Agencia:
Dirección:
Teléfono:
Section VI:
Nombre de denuncia de la Agencia es contra:
Nombre de la persona que la denuncia es contra:
Título:
Ubicación:
Teléfono (si está disponible):

Usted puede conectar cualquier material escrito u otra información que crees que es relevante a su queja. Su firma y la fecha se **requieren** a continuación:

_____ _____

Firma Fecha

Por favor enviar este formulario personalmente en la siguiente dirección, o enviar por correo este formulario a:

Helping Ourselves Pursue Enrichment Incorporated
Marc Haley, /Human Resource/Safety Manager
877 S. Alvernon Way Tucson, AZ 85711
(520) 770-1197 EX: 1213
marchaley@hopearizona.org

Una copia de este formulario puede encontrarse en línea en **https://hopearizona.org**

Discrimination ADA/Title VI Investigations, Complaints, and Lawsuits

If no investigations, lawsuits, or complaints were filed select the option below.

☒ **Helping Ourselves Pursue Enrichment Incorporated** has not had any ADA nor Title VI Discrimination complaints, investigations, or lawsuits in **2024/2025**.

Complainant	Date (Month, Day, Year)	Basis of Complaint (Race, Color, National Origin or Disability)	Summary of Allegation	Status	Action(s) Taken	Final Findings?
Investigations						
1)						
2)						
Lawsuits						
1)						
2)						
Complaints						
1)						
2)						

Public Participation Plan

Helping Ourselves Pursue Enrichment Incorporated is engaging the public in its planning and decision-making processes, as well as its marketing and outreach activities. The public will be invited to participate in the process whether through public meetings or surveys.

As an agency receiving federal financial assistance, **Helping Ourselves Pursue Enrichment Incorporated** made the following community outreach efforts and activities to engage minority and Limited English Proficient populations since the last Title VI Plan submittal to ADOT CRO.

☒ Advertised public announcements through newspapers, fliers, or radio
☒ Posted the Nondiscrimination Public Notices to the following locations:
- ☒ Within transportation vehicles
- ☒ Lobby of agency

☒ Partnered with other local agencies to advertise services provided

☒ Added public interactive content to the agency's webpage for the public e.g. social media, to communicate schedule changes or activities (http://hopearizona.org)

Helping Ourselves Pursue Enrichment Incorporated will make the following community outreach efforts for the **upcoming year**:

☒ Advertised public announcements through newspapers, fliers, or radio
☒ Posted the Nondiscrimination Public Notices to the following locations:
- ☒ Within transportation vehicles
- ☒ Lobby of agency

☒ Partnered with other local agencies to advertise services provided

☒ Added public interactive content to the agency's webpage for the public e.g. social media, to communicate schedule changes or activities (http://hopearizona.org)

https://www.facebook.com/HOPEincArizona/

Limited English Proficiency Plan

Helping Ourselves Pursue Enrichment Incorporated has developed the following Limited English Proficiency Plan (LEP) to help identify reasonable steps to provide language assistance for LEP persons seeking meaningful access to **Helping Ourselves Pursue Enrichment Incorporated** services as required by Executive Order 13166. A Limited English Proficiency person is one who does not speak English as their primary language and who has a limited ability to read, speak, write, or understand English.

This plan details procedures on how to identify a person who may need language assistance, the ways in which assistance may be provided, training to staff, notification to LEP persons that assistance is available, and information for future updates. In developing the plan while determining the **Helping Ourselves Pursue Enrichment Incorporated**'s extent of obligation to provide LEP services, the **Helping Ourselves Pursue Enrichment Incorporated** undertook a U.S. Department of Transportation four-factor LEP analysis which considers the following:

1) The number or proportion of LEP persons eligible in the **Helping Ourselves Pursue Enrichment Incorporated** service area who may be served or likely to encounter by **Helping Ourselves Pursue Enrichment Incorporated** program, activities, or services.

U.S. Census Bureau

AMERICAN FactFinder

B16001 | LANGUAGE SPOKEN AT HOME BY ABILITY TO SPEAK ENGLISH FOR THE POPULATION 5 YEARS AND OVER
Universe: Population 5 years and over
2020 American Community Survey 5-Year Estimates

	Apache County, Arizona		Cochise County, Arizona		Navajo County, Arizona		Pima County, Arizona		Pinal County, Arizona		Santa Cruz County, Arizona		Yavapai County, Arizona		Yuma County, Arizona	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Marg in of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Total:	66,467	± 139	121,324	± 122	99,646	48	938,413	± 82	364,260	± 148	43,619	± 42	206,720	* ****	187,835	± 12
Speak only English	29,709	± 676	86,720	± 1,048	62,650	759	669,630	± 3,524	287,724	± 2,262	10,136	± 749	185,224	± 1,367	90,047	± 1,703
Spanish or Spanish Creole:	2,245	± 281	30,039	± 990	5,759	587	221,947	± 2,951	63,070	± 2,122	33,020	± 759	16,104	± 1,168	93,778	± 1,552
Speak English "very well"	1,591	± 269	19,652	± 949	4,210	496	158,458	± 2,836	43,331	± 1,880	21,444	± 968	9,804	± 886	51,051	± 1,821

Speak English less than "very well"	654	± 198	10,387	± 764	1,549	380	63,489	± 1,814	19,739	± 1,479	11,576	± 832	6,300	± 840	42,727	± 1,515
French (incl. Patois, Cajun):	33	± 32	132	± 73	124	84	3,248	± 491	1,172	± 451	55	± 48	726	± 225	346	± 203
Speak English "very well"	18	± 14	51	± 45	95	80	2,769	± 462	1,050	± 398	49	± 46	618	± 217	229	± 136
Speak English less than "very well"	15	± 29	81	± 55	29	26	479	± 159	122	± 96	6	± 9	108	± 78	117	± 148
French Creole:	1	± 3	0	± 29	13	20	178	± 206	4	± 7	2	± 6	3	± 7	0	± 29
Speak English "very well"	1	± 3	0	± 29	13	20	178	± 206	4	± 7	2	± 6	3	± 7	0	± 29
Speak English less than "very well"	0	± 29	0	± 29	0	29	0	± 29	0	± 29	0	± 26	0	± 29	0	± 29
Italian:	30	± 68	150	± 76	90	100	944	± 215	367	± 364	25	± 40	470	± 203	137	± 70
Speak English "very well"	30	± 68	140	± 74	90	100	694	± 179	367	± 364	25	± 40	344	± 152	92	± 51
Speak English less than "very well"	0	± 29	10	± 15	0	29	250	± 100	0	± 29	0	± 26	126	± 90	45	± 46
Portuguese or Portuguese Creole:	21	± 20	29	± 27	36	59	617	± 229	263	± 200	14	± 19	61	± 63	48	± 45
Speak English "very well"	16	± 18	29	± 27	36	59	490	± 194	243	± 186	14	± 19	60	± 63	14	± 21
Speak English less than "very well"	5	± 9	0	± 29	0	29	127	± 67	20	± 26	0	± 26	1	± 2	34	± 40
German:	43	± 28	1,329	± 319	119	71	4,157	± 516	1,100	± 268	48	± 42	1,007	± 387	449	± 221
Speak English "very well"	43	± 28	1,052	± 252	114	73	3,768	± 485	999	± 246	25	± 27	879	± 329	383	± 216
Speak English less than "very well"	0	± 29	277	± 132	5	8	389	± 109	101	± 77	23	± 35	128	± 97	66	± 44
Yiddish:	0	± 29	0	± 29	0	29	175	± 99	0	± 29	0	± 26	0	± 29	5	± 8
Speak English "very well"	0	± 29	0	± 29	0	29	158	± 94	0	± 29	0	± 26	0	± 29	5	± 8
Speak English less than "very well"	0	± 29	0	± 29	0	29	17	± 26	0	± 29	0	± 26	0	± 29	0	± 29
Other West Germanic languages:	29	± 34	64	± 71	18	20	437	± 205	85	± 71	0	± 26	214	± 121	27	± 39
Speak English "very well"	29	± 34	64	± 71	6	10	437	± 205	44	± 41	0	± 26	192	± 119	27	± 39
Speak English less than "very well"	0	± 29	0	± 29	12	17	0	± 29	41	± 54	0	± 26	22	± 24	0	± 29
Scandinavian languages:	0	± 29	57	± 66	67	50	276	± 100	77	± 106	0	± 26	217	± 127	15	± 18
Speak English "very well"	0	± 29	57	± 66	67	50	210	± 87	77	± 106	0	± 26	195	± 125	15	± 18
Speak English less than "very well"	0	± 29	0	± 29	0	29	66	± 50	0	± 29	0	± 26	22	± 28	0	± 29

Greek:	0	± 29	88	± 116	0	29	559	± 160	90	± 79	0	± 26	108	± 102	6 ± 2	± 62
Speak English "very well"	0	± 29	88	± 116	0	29	451	± 153	75	± 78	0	± 26	108	± 102	6 ± 2	± 62
Speak English less than "very well"	0	± 29	0	± 29	0	29	108	± 67	15	± 25	0	± 26	0	± 29	0	± 29
Russian:	11	± 19	183	± 120	57	79	1,686	± 501	150	± 127	0	± 26	58	± 56	12	± 15
Speak English "very well"	11	± 19	130	± 79	57	79	1,103	± 328	99	± 99	0	± 26	52	± 51	7	± 12
Speak English less than "very well"	0	± 29	53	± 53	0	29	583	± 236	51	± 52	0	± 26	6	± 10	5	± 8
Polish:	0	± 29	41	± 32	63	65	549	± 189	339	± 150	0	± 26	122	± 82	29	± 32
Speak English "very well"	0	± 29	41	± 32	53	64	404	± 189	224	± 104	0	± 26	100	± 79	29	± 32
Speak English less than "very well"	0	± 29	0	± 29	10	15	145	± 72	115	± 69	0	± 26	22	± 25	0	± 29
Serbo-Croatian:	0	± 29	34	± 42	7	10	615	± 241	63	± 71	0	± 26	25	± 28	0	± 29
Speak English "very well"	0	± 29	34	± 42	7	10	467	± 223	63	± 71	0	± 26	25	± 28	0	± 29
Speak English less than "very well"	0	± 29	0	± 29	0	29	148	± 79	0	± 29	0	± 26	0	± 29	0	± 29
Other Slavic languages:	84	± 94	61	± 68	16	26	542	± 231	61	± 63	6	± 8	114	± 77	50	± 44
Speak English "very well"	84	± 94	49	± 50	16	26	465	± 210	61	± 63	6	± 8	103	± 76	41	± 37
Speak English less than "very well"	0	± 29	12	± 21	0	29	77	± 72	0	± 29	0	± 26	11	± 17	9	± 14
Armenian:	0	± 29	7	± 16	0	29	159	± 102	6	± 12	0	± 26	0	± 29	0	± 29
Speak English "very well"	0	± 29	7	± 16	0	29	137	± 95	6	± 12	0	± 26	0	± 29	0	± 29
Speak English less than "very well"	0	± 29	0	± 29	0	29	22	± 34	0	± 29	0	± 26	0	± 29	0	± 29
Persian:	12	± 25	14	± 20	2	4	1,082	± 396	8	± 12	0	± 26	147	± 90	12	± 24
Speak English "very well"	12	± 25	14	± 20	2	4	689	± 240	8	± 12	0	± 26	67	± 55	12	± 24
Speak English less than "very well"	0	± 29	0	± 29	0	29	393	± 308	0	± 29	0	± 26	80	± 82	0	± 29
Gujarati:	14	± 21	0	± 29	0	29	321	± 215	118	± 116	18	± 31	49	± 64	33	± 44
Speak English "very well"	10	± 15	0	± 29	0	29	184	± 125	110	± 108	18	± 31	49	± 64	4	± 10
Speak English less than "very well"	4	± 6	0	± 29	0	29	137	± 149	8	± 11	0	± 26	0	± 29	29	± 42
Hindi:	16	± 20	0	± 29	48	52	891	± 302	257	± 195	4	± 7	0	± 29	81	± 70
Speak English "very well"	16	± 20	0	± 29	32	49	793	± 275	223	± 196	0	± 26	0	± 29	70	± 64

Speak English less than "very well"	0	± 29	0	± 29	16	16	98	± 75	34	± 28	4	± 7	0	± 29	11	± 17
Urdu:	0	± 29	0	± 29	0	29	459	± 231	19	± 24	0	± 26	23	± 38	156	± 112
Speak English "very well"	0	± 29	0	± 29	0	29	396	± 208	19	± 24	0	± 26	23	± 38	129	± 106
Speak English less than "very well"	0	± 29	0	± 29	0	29	63	± 114	0	± 29	0	± 26	0	± 29	27	± 29
Other Indic languages:	0	± 29	33	± 50	66	70	1,408	± 468	116	± 65	41	± 55	0	± 29	147	± 183
Speak English "very well"	0	± 29	0	± 29	24	25	811	± 277	26	± 30	41	± 55	0	± 29	141	± 182
Speak English less than "very well"	0	± 29	33	± 50	42	45	597	± 266	90	± 64	0	± 26	0	± 29	6	± 11
Other Indo-European languages:	0	± 29	76	± 61	0	29	514	± 229	55	± 43	0	± 26	42	± 42	0	± 29
Speak English "very well"	0	± 29	38	± 43	0	29	417	± 199	55	± 43	0	± 26	20	± 34	0	± 29
Speak English less than "very well"	0	± 29	38	± 42	0	29	97	± 68	0	± 29	0	± 26	22	± 25	0	± 29
Chinese:	2	± 4	47	± 45	50	77	5,843	± 792	442	± 202	35	± 39	186	± 130	151	± 102
Speak English "very well"	0	± 29	47	± 45	26	38	3,026	± 550	197	± 128	17	± 20	112	± 110	132	± 109
Speak English less than "very well"	2	± 4	0	± 29	24	41	2,817	± 482	245	± 129	18	± 22	74	± 70	19	± 28
Japanese:	0	± 29	225	± 150	54	61	1,516	± 357	191	± 130	0	± 26	140	± 102	120	± 67
Speak English "very well"	0	± 29	144	± 113	48	60	812	± 226	176	± 121	0	± 26	118	± 100	71	± 47
Speak English less than "very well"	0	± 29	81	± 62	6	9	704	± 212	15	± 18	0	± 26	22	± 29	49	± 45
Korean:	11	± 17	459	± 153	11	14	1,660	± 431	542	± 330	165	± 174	123	± 81	149	± 89
Speak English "very well"	11	± 17	292	± 142	0	29	752	± 251	474	± 305	22	± 30	67	± 52	69	± 55
Speak English less than "very well"	0	± 29	167	± 86	11	14	908	± 288	68	± 61	143	± 147	56	± 54	80	± 67
Mon-Khmer, Cambodian:	20	± 30	0	± 29	30	42	63	± 157	25	± 23	0	± 26	3	± 6	9	± 16
Speak English "very well"	17	± 25	0	± 29	0	29	125	± 74	7	± 12	0	± 26	0	± 29	9	± 16
Speak English less than "very well"	3	± 7	0	± 29	30	42	138	± 102	18	± 20	0	± 26	3	± 6	0	± 29
Hmong:	0	± 29	0	± 29	0	29	63	± 88	32	± 26	0	± 26	67	± 109	0	± 29
Speak English "very well"	0	± 29	0	± 29	0	29	54	± 87	32	± 26	0	± 26	53	± 85	0	± 29
Speak English less than "very well"	0	± 29	0	± 29	0	29	9	± 14	0	± 29	0	± 26	14	± 24	0	± 29
Thai:	0	± 29	80	± 73	6	14	525	± 188	10 9	± 85	0	± 26	34	± 39	88	± 102

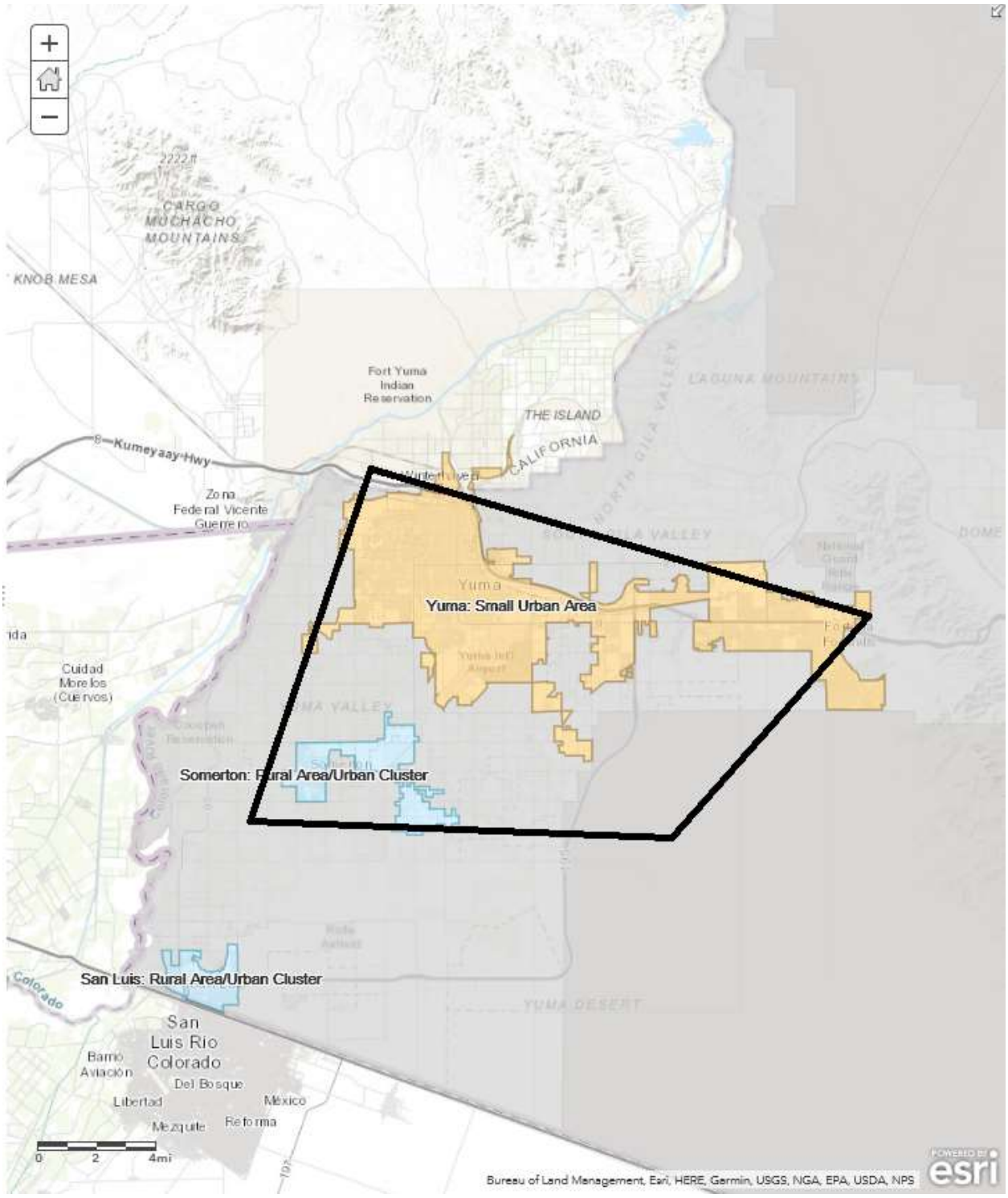
Speak English "very well"	0	± 29	43	± 46	0	29	338	± 133	0	± 29	0	± 26	10	± 19	61	± 77
Speak English less than "very well"	0	± 29	37	± 54	6	14	187	± 107	109	± 85	0	± 26	24	± 35	27	± 35
Laotian:	0	± 29	12	± 17	0	29	103	± 129	582	± 387	0	± 26	0	± 29	11	± 24
Speak English "very well"	0	± 29	12	± 17	0	29	49	± 53	247	± 208	0	± 26	0	± 29	6	± 12
Speak English less than "very well"	0	± 29	0	± 29	0	29	54	± 85	335	± 337	0	± 26	0	± 29	5	± 12
Vietnamese:	71	± 43	315	± 162	7	10	2,807	± 596	497	± 260	0	± 26	119	± 95	313	± 200
Speak English "very well"	23	± 27	69	± 66	0	29	1,119	± 312	194	± 107	0	± 26	39	± 40	218	± 165
Speak English less than "very well"	48	± 33	246	± 160	7	10	1,688	± 394	303	± 181	0	± 26	80	± 67	95	± 98
Other Asian languages:	69	± 42	44	± 74	37	44	1,201	± 368	89	± 95	7	± 11	76	± 68	39	± 52
Speak English "very well"	46	± 35	0	± 29	14	23	825	± 278	29	± 31	7	± 11	42	± 54	34	± 51
Speak English less than "very well"	23	± 29	44	± 74	23	27	376	± 215	60	± 89	0	± 26	34	± 47	5	± 8
Tagalog:	34	± 28	612	± 201	244	135	2,171	± 426	1,263	± 401	15	± 26	94	± 78	548	± 172
Speak English "very well"	26	± 26	359	± 142	176	128	1,781	± 368	978	± 373	11	± 19	94	± 78	376	± 167
Speak English less than "very well"	8	± 13	253	± 117	68	59	390	± 140	285	± 93	4	± 7	0	± 29	172	± 114
Other Pacific Island languages:	17	± 18	50	± 49	63	62	1,100	± 397	968	± 340	0	± 26	12	± 20	103	± 69
Speak English "very well"	9	± 10	43	± 47	54	60	937	± 381	713	± 306	0	± 26	0	± 29	51	± 43
Speak English less than "very well"	8	± 9	7	± 11	9	13	163	± 72	255	± 218	0	± 26	12	± 20	52	± 49
Navajo:	33,583	± 647	109	± 79	20,251	687	1,476	± 350	769	± 321	2	± 4	347	± 153	264	± 154
Speak English "very well"	26,294	± 614	101	± 74	13,911	651	1,262	± 347	624	± 240	0	± 26	326	± 153	196	± 149
Speak English less than "very well"	7,289	± 295	8	± 16	6,340	371	214	± 142	145	± 174	2	± 4	21	± 48	68	± 54
Other Native North American languages:	330	± 81	58	± 52	9,699	725	3,709	± 405	2,298	± 645	8	± 15	526	± 297	239	± 92
Speak English "very well"	271	± 65	55	± 50	8,415	705	3,257	± 424	2,231	± 641	8	± 15	482	± 298	233	± 92
Speak English less than "very well"	59	± 40	3	± 5	1,284	231	452	± 126	67	± 53	0	± 26	44	± 38	6	± 5
Hungarian:	37	± 51	0	± 29	48	59	136	± 80	41	± 41	0	± 26	30	± 37	29	± 27
Speak English "very well"	37	± 51	0	± 29	48	59	80	± 47	8	± 15	0	± 26	30	± 37	14	± 13

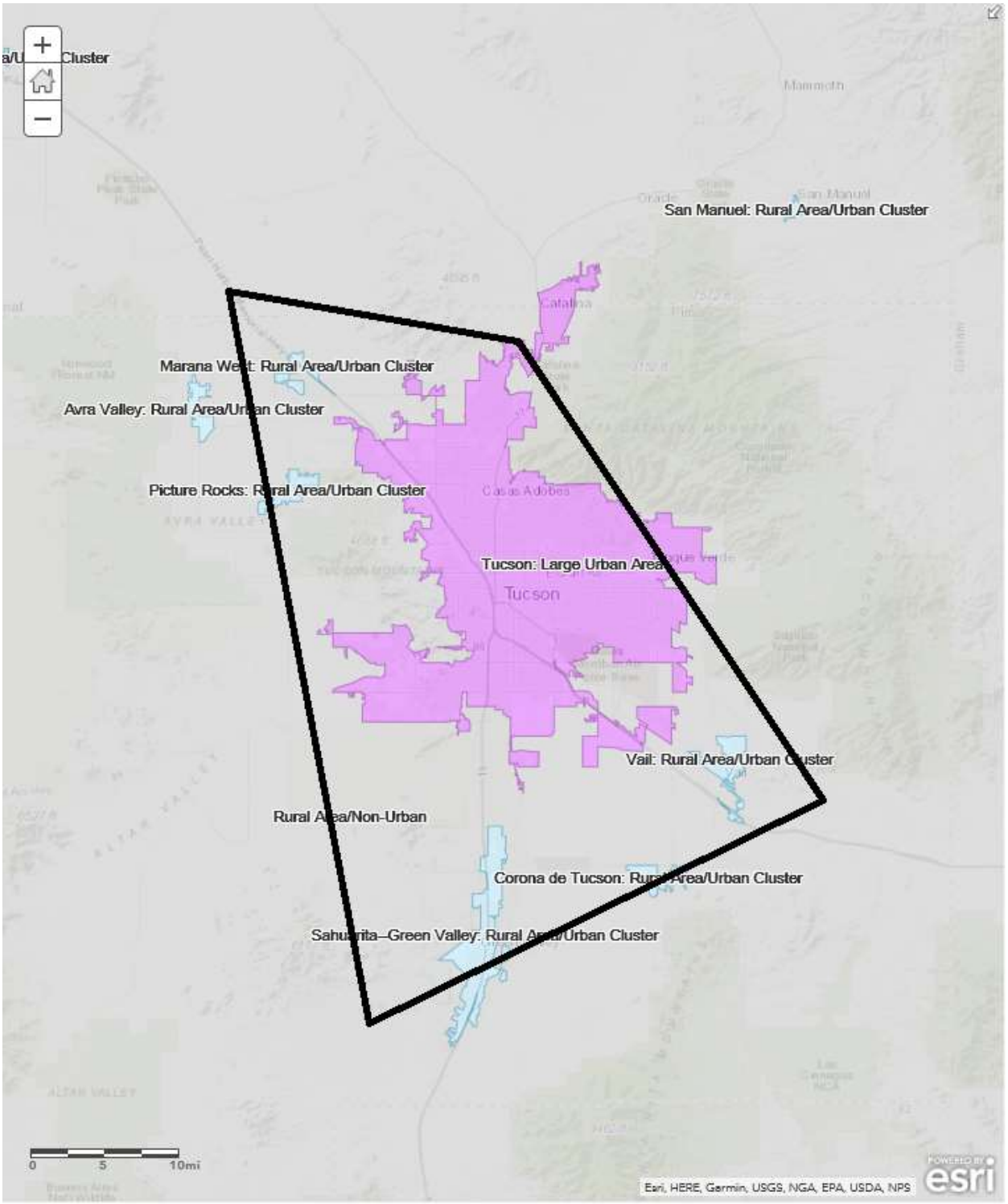
Speak English less than "very well"	0	± 29	0	± 29	0	29	56	± 51	33	± 38	0	± 26	0	± 29	15	± 20
Arabic:	0	± 29	170	± 104	10	12	2,748	± 519	505	± 302	0	± 26	52	± 48	266	± 188
Speak English "very well"	0	± 29	170	± 104	10	12	1,573	± 351	332	± 207	0	± 26	48	± 47	166	± 139
Speak English less than "very well"	0	± 29	0	± 29	0	29	1,175	± 347	173	± 161	0	± 26	4	± 6	100	± 83
Hebrew:	0	± 29	13	± 16	1	3	605	± 174	46	± 34	0	± 26	47	± 53	15	± 13
Speak English "very well"	0	± 29	13	± 16	1	3	583	± 171	46	± 34	0	± 26	2	± 7	15	± 13
Speak English less than "very well"	0	± 29	0	± 29	0	29	22	± 25	0	± 29	0	± 26	45	± 54	0	± 29
African languages:	45	± 58	40	± 46	0	29	1,908	± 620	445	± 222	18	± 25	110	± 81	6	± 13
Speak English "very well"	12	± 16	40	± 46	0	29	1,230	± 427	325	± 180	18	± 25	58	± 64	0	± 29
Speak English less than "very well"	33	± 42	0	± 29	0	29	678	± 361	120	± 120	0	± 26	52	± 52	6	± 13
Other and unspecified languages:	0	± 29	33	± 34	0	29	185	± 104	272	± 183	0	± 26	40	± 35	51	± 51
Speak English "very well"	0	± 29	33	± 34	0	29	92	± 74	174	± 121	0	± 26	14	± 22	41	± 43
Speak English less than "very well"	0	± 29	0	± 29	0	29	93	± 80	98	± 81	0	± 26	26	± 27	10	± 15

HOPE has developed the following Limited English Proficiency Plan (LEP) to help identify reasonable steps to provide language assistance for LEP persons seeking meaningful access to HOPE services as required by Executive Order 13166. A Limited English Proficiency person is one who does not speak English as their primary language and who has a limited ability to read, speak, write, or understand English.

This plan details procedures on how to identify a person who may need language assistance, the ways in which assistance may be provided, training to staff, notification to LEP persons that assistance is available, and information for future updates. In developing the plan while determining the HOPE's extent of obligation to provide LEP services, HOPE undertook a U.S. Department of Transportation four-factor LEP analysis which considers the following:

1) The number or proportion of LEP persons eligible in the HOPE service area who may be served or likely to encounter by HOPE program, activities, or services;


Yuma: Small Urban Area
Somerton: Rural Area/Urban Cluster
San Luis: Rural Area/Urban Cluster
Fort Yuma Indian Reservation
THE ISLAND
CALIFORNIA
Kumeyaay Hwy
Zona Federal Vicente Guerrero
Cuidad Morelos (Cuervos)
San Luis Rio Colorado
Barrio Aviación
Del Bosque
Libertad
México
Mezquite
Reforma
CARGO MUCHACHO MOUNTAINS
KNOB MESA
LAGUNA MOUNTAINS
YUMA DESERT
Bureau of Land Management, Esri, HERE, Garmin, USGS, NGA, EPA, USDA, NPS


Cluster
San Manuel: Rural Area/Urban Cluster
Marana West: Rural Area/Urban Cluster
Avra Valley: Rural Area/Urban Cluster
Picture Rocks: Rural Area/Urban Cluster
Tucson: Large Urban Area
Tucson
Vail: Rural Area/Urban Cluster
Rural Area/Non-Urban
Corona de Tucson: Rural Area/Urban Cluster
Sahuarita–Green Valley: Rural Area/Urban Cluster
0
5
10mi
Esri, HERE, Garmin, USGS, NGA, EPA, USDA, NPS

2) The frequency with which LEP individuals come in contact with an **Helping Ourselves Pursue Enrichment Incorporated** services.

Helping Ourselves Pursue Enrichment Incorporated's staff reviewed the frequency with which office staff, dispatchers and drivers have, or could have, contact with LEP persons for **2024/2025** . **Helping Ourselves Pursue Enrichment Incorporated** averages **1**contact per **YEAR.**

3) The nature and importance of the program, activities or services provided by the **Helping Ourselves Pursue Enrichment Incorporated** to the LEP population; increases health equity and prevents healthcare disparities.

- Transportation is an important element to people's independence.
- Members are transported to medical appointments, school, work, job interviews and personal assistance trips to help them achieve their recovery goals.

- Inclusive community engagement is critical to ensuring that transportation planning is responsive to the needs of all residents and that everyone has access to viable health care.

4) The resources available to **Helping Ourselves Pursue Enrichment Incorporated** and overall costs to provide LEP assistance. A brief description of these considerations is provided in the following section.

Helping Ourselves Pursue Enrichment Incorporated will ensure a statement in Spanish will be included in all public outreach notices. Every effort will be made to provide vital information to LEP individuals in the language requested. To ensure proper linguistic access for all those seeking/receiving HOPE services, HOPE employs the following steps:

- The Outpatient Intake Form shall identify and include evidence of:
  - A patient's primary language and the need for interpretation.
  - Patient/family culture has been discussed with them
  - Cultural factors are incorporated into the Service Plan
  - Patient's Primary/Preferred language is documented in the clinical record
  - For LEP family/patients, language services were offered and/or utilized
  - Patients were informed of their right to free of charge language services (i.e. distribution of Patient Handbook)
- Brochures and Forms: All Outpatient forms and brochures will be available in both English and Spanish (Upon Request).
- Interpreters: Behavioral Health staff will utilize HOPE, Inc. staff as interpreters when applicable. Outside interpretive services will be utilized when needed (such as the Language Line).
- Point-To-Your-Language cards are kept on-site in each building lobby and in HOPE vehicles.
- Grievance and Appeals Process:
  - The Clinical Director will ensure that Grievance and Appeals processes are culturally and linguistically accessible, utilizing interpretation and translation services when necessary.

It is the policy of HOPE, Inc. to utilize the services of an outside vendor to test and certify the skill level of the bi-lingual staff that has a primary function of interacting with HOPE, Inc. patients. Bi-lingual HOPE staff may take the ALTA language certification test (written or oral) to become a verified on-site interpreter. The HOPE Human Resources Department maintains a current list of all ALTA certified staff and provides that information organization-wide.

Safe Harbor Provision for written translations

Helping Ourselves Pursue Enrichment Incorporated complies with the Safe Harbor Provision, as evidenced by the number of documents available in the Spanish language. With respect to Title VI information, the following shall be made available in Spanish:

(1) Non Discrimination Notice
(2) Discrimination Complaint Procedures
(3) Discrimination Complaint Form

In addition, we will conduct our marketing (including using translated materials) in a manner that reaches each LEP group. Vital documents include the following:

(1) Notices of free language assistance for persons with LEP
(2) Notice of Non-Discrimination and Reasonable Accommodation
(3) Outreach Materials
(4) Bus Schedules
(5) Route Changes
(6) Public Hearings

1) **Helping Ourselves Pursue Enrichment Incorporated** provides language assistance services through the below methods:

☒ Staff is provided a list of what written and oral language assistance products and methods the agency has implemented and how agency staff can obtain those services.
☒ Instructions are provided to customer service staff and other **Helping Ourselves Pursue Enrichment Incorporated** staff who regularly take phone calls from the general public on how to respond to an LEP caller.
☒ Instructions are provided to vehicle operators, station managers, and others who regularly interact with the public on how to respond to an LEP customer.
☒ Use of "I Speak" cards.

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2) **Helping Ourselves Pursue Enrichment Incorporated** has a process to ensure the competency of interpreters and translation service through the following methods:

Helping Ourselves Pursue Enrichment Incorporated will ask the interpreter or translator to demonstrate that he or she can communicate or translate information accurately in both English and the other language. **Helping Ourselves Pursue Enrichment Incorporated** will train the interpreter or translator in specialized terms and concepts associated with the agency's policies and activities. **Helping Ourselves Pursue Enrichment Incorporated** will instruct the interpreter or translator that he or she should not deviate into a role as counselor, legal advisor, or any other role aside from interpreting or translator. **Helping Ourselves Pursue Enrichment Incorporated** will ask the interpreter or translator to attest that he or she does not have a conflict of interest on the issues that they would be providing interpretation services.

3) **Helping Ourselves Pursue Enrichment Incorporated** provides notice to LEP persons about the availability of language assistance through the following methods:

☒ Posting signs in intake areas and other points of entry
☒ Statements in outreach documents that language services are available from the agency.
☒ Signs and handouts available in vehicles and at stations
☒ Agency websites

4) **Helping Ourselves Pursue Enrichment Incorporated** monitors, evaluates and updates the LEP plan through the following process:

Helping Ourselves Pursue Enrichment Incorporated will monitor the LEP plan by conducting an annual Four-Factor analysis, establishing a process to obtain feedback from internal staff and members of the public and conducting internal evaluations to determine whether the language assistance measures are working for staff. **Helping Ourselves Pursue Enrichment Incorporated** will make changes to the language assistance plan based

on feedback received. **Helping Ourselves Pursue Enrichment Incorporated** may take into account the cost of proposed changes and the resources available to them. Depending on the evaluation, **Helping Ourselves Pursue Enrichment Incorporated** may choose to disseminate more widely those language assistance measures that are particularly effective or modify or eliminate those measures that have not been effective. **Helping Ourselves Pursue Enrichment Incorporated** will consider new language assistance needs when expanding transit service into areas with high concentrations of LEP persons will consider modifying their implementation plan to provide language assistance measures to areas not previously served by the agency.

5) **Helping Ourselves Pursue Enrichment Incorporated** trains employees to know their obligations to provide meaningful access to information and services for LEP persons and all employees in public contact positions will be properly trained to work effectively with in-person and telephone interpreters. **Helping Ourselves Pursue Enrichment Incorporated** will implement processes for training of staff through the following procedures:

Helping Ourselves Pursue Enrichment Incorporated will identify staff that are likely to come into contact with LEP persons as well as management staff that have frequent contact with LEP persons in order to target training to the appropriate staff. **Helping Ourselves Pursue Enrichment Incorporated** will identify existing staff training opportunities, as it may be cost-effective to integrate training on their responsibilities to persons with limited English proficiency into agency training that occurs on an ongoing basis. **Helping Ourselves Pursue Enrichment Incorporated** will include this training as part of the orientation for new employees. Existing employees, especially managers and those who work with the public may periodically take part in re-training or new training sessions to keep up to date on their responsibilities to LEP persons. **Helping Ourselves Pursue Enrichment Incorporated** will implement LEP training to be provided for agency staff**. Helping Ourselves Pursue Enrichment Incorporated** staff training for LEP to include:

- A summary of the **Helping Ourselves Pursue Enrichment Incorporated** responsibilities under the DOT LEP Guidance.
- A summary of the **Helping Ourselves Pursue Enrichment Incorporated** language assistance plan.
- A summary of the number and proportion of LEP persons in the **Helping Ourselves Pursue Enrichment Incorporated** service area, the frequency of contact between the LEP population and the agency's programs and activities, and the importance of the programs and activities to the population.
- A description of the type of language assistance that the agency is currently providing and instructions on how agency staff can access these products and services; and
- A description of the **Helping Ourselves Pursue Enrichment Incorporated** cultural sensitivity policies and practices.

HOPE Incorporated
Helping Durselves Pursue Enrichment

You can request assistance in your preferred language!

Interpretation services will be provided to you or your family members in:

- Spanish
- American Sign Language (ASL)
- Or any other language

You can also request written materials in the language of your choice, including information printed in Braille.

We're in it together.

IF YOU NEED AN INTERPRETER, PLEASE POINT TO YOUR LANGUAGE

Albanian: Shqip Nëse keni nevojë për përkthyes, tregoni gjuhën tuaj.	**Arabic:** عربي إذا كنت في حاجة إلى مترجم أشر إلى اللغة المطلوبة
Armenian: Հայերեն Եթե դուք թարգմանչի կարիք ունեք, խնդրում ենք մատնանշել ձեր լեզուն:	**Bosnian:** Bosanski Ako vam je portreban prevodilac, označite vas jezik.
Burmese: မြန်မာ စကားပြန်လိုရင် သင့်ဘာသာစကားကို လက်ညှိုးထိုးပြပါ	**Cambodian:** ខ្មែរ បើអស់លោកត្រូវការអ្នកបកប្រែ សូមចង្អុលទៅកាន់ភាសារបស់ខ្លួន
Croatian: Hrvatski Ako vam je potreban prevodilac, označite vas jezik.	**Dutch:** Nederlands Als u een tolk nodig hebt, wijs dan uw taal aan.
Farsi: فارسی اگر به مترجم احتیاج دارید لطفا با انگشت زبان خود را نشان دهید	**Finnish:** Suomi Jos tarvitset tulkin, osoita haluamaasi kielivalintaa.
French: Français Si vous avez besoin d'un interprète, indiquez votre langue.	**German:** Deutsch Bitte zeigen Sie auf Ihre Sprache, wenn Sie einen Dolmetscher brauchen.
Greek: Ελληνικά Εάν χρειάζεστε διερμηνέα, παρακαλώ δείξτε τη γλώσσα σας.	**Gujarati:** ગુજરાતી જો તમારે ભાષાંતરકર્તાની જરૂર હોય તો તમારી ભાષા તરફ ચીંધો.
Haitian Creole: Kreyòl Ayisyen Si w bezwen yon entèprèt, montre ki lang ou pale.	**Hebrew:** עברית [illegible]
Hindi: हिन्दी यदि आप को भाषा अनुवादक की आवश्यकता हो, तो अपनी भाषा की ओर इशारा करें।	**Hmong:** Hmoob Yog koj xav tau tus neeg pes lus, taw tes rau koj yam lus.
Hungarian: Magyar Ha tolmácsra van szüksége, mutasson anyanyelvére.	**Ibo:** Ibo Oburu na ichoro onye nkowa okwu, tuo aka na asusu gi.
Italian: Italiano Se avete bisogno di un interprete, puntate alla vostra lingua.	**Japanese:** 日本語 通訳をお探しの場合、必要な言語を指し示してください。
Korean: 한국어 통역서비스가 필요한 언어를 선택하십시오.	**Laotian:** ພາສາລາວ [illegible]
Latvian: Latviešu Ja Jums ir vajadzīgs tulks, lūdzu, norādiet Jūsu valodu.	**Polish:** Polski Jeśli potrzebują Państwo tłumacza, proszę wskazać na swój język.
Portuguese: Português Se precisa de um intérprete aponte para o nome da língua que fala.	**Punjabi:** ਪੰਜਾਬੀ [illegible]
Romanian: Român Daca aveti nevoie de un interpret, va rugam indicati catre limba vorbita.	**Russian:** Русский Если Вам нужен переводчик, укажите свой язык.
Serbian: Српски Ако Вам је потребан преводилац, означите Ваш језик.	**Somali:** Soomaali Hadaad u baahan tahay qof kuu turjuma, tilmaamo luqadaada.
Spanish: Español Si necesita un intérprete, señale su idioma.	**Swedish:** Svenska Om du behöver tolk, var god peka på ditt språk.
Tagalog: Tagalog Kung kailangan ninyo ng interpreter o tagasalin, ituro ang inyong wika.	**Tamil:** தமிழ் [illegible]
Thai: ไทย หากท่านต้องการล่าม กรุณาชี้ที่ภาษาของท่าน	**Vietnamese:** Tiếng Việt Nếu cần thông dịch viên xin hãy chỉ vào ngôn ngữ của quý vị.
Yiddish: ייִדיש [illegible]	**Yoruba:** Ede Yoruba Ti o ba nilo ogbufo, jowo toka si ede re.

	Simplified Chinese	Traditional Chinese
Cantonese	粤语	粵語
Chaochow	潮州话	潮州話
Fukienese	福建话	福建話
Fuzhou	福州话	福州話
Mandarin	普通话	國語
Shanghai	上海话	上海話
Taiwanese	台湾话	台語
Toishanese	台山话	台山話
Ning Po	宁波话	寧波話
	如果您需要译员，请指向您的语言。	如果您需要譯員，請指向您的語言。

Language Services Associates

INTERPRETALK® Interpreting by telephone

Non-elected Committees Membership Table

Subrecipients who select the membership of transit-related, non-elected planning boards, advisory councils, or committees must provide a table depicting the membership of those organizations broken down by race. Subrecipients also must include a description of the efforts made to encourage participation of minorities on these boards, councils, and committees.

☒ **Helping Ourselves Pursue Enrichment Incorporated** does **not** select the membership of any transit-related committees, planning boards, or advisory councils.

Monitoring for Subrecipient Title VI Compliance

Describe how you monitor your subrecipients. This can be through site visits, submissions of Title VI Plans annually, or training and surveys.

☒ **Helping Ourselves Pursue Enrichment Incorporated** does **not** monitor subrecipients for Title VI compliance as it does not have any FTA subrecipients.

Title VI Equity Analysis

A subrecipient planning to acquire land to construct certain types of facilities must not discriminate on the basis of race, color, or national origin, against persons who may, as a result of the construction, be displaced from their homes or businesses. “Facilities” in this context does not include transit stations or bus shelters, but instead refers to storage facilities, maintenance facilities, and operation centers.

There are many steps involved in the planning process prior to the actual construction of a facility. It is during these planning phases that attention needs to be paid to equity and non-discrimination through equity analysis. The Title VI Equity Analysis must be done before the selection of the preferred site.

Note: Even if facility construction is financed with non-FTA funds, if the subrecipient organization receives any FTA dollars, it must comply with this requirement.

☒ **Helping Ourselves Pursue Enrichment Incorporated** has no current or anticipated plans to develop new transit facilities covered by these requirements.

Fixed Route Transit Provider Analysis

Fixed Route: Public transit service (other than by aircraft) provided on a repetitive, fixed-schedule basis along a specific route, with vehicles stopping to pick up passengers.

A subrecipient providing fixed route service, as defined above, must determine the distribution of transit amenities or the vehicle assignments for each mode in a non-discriminatory manner. The subrecipient must develop policies to ensure service is not distributed on the basis of race, color, or national origin.

Effective practices to fulfill the Service Standards requirements include developing written policies covering each of the following service indicators: [INSTRUCTIONS] (can be expressed in writing or in table format – see Circular Appendix G & H pp. 87-91)

☒ **Helping Ourselves Pursue Enrichment Incorporated** is **not** a Fixed Route Transit Provider.

Board Approval for the Title VI Plan

Will present to Board of Director for approval –

On Thu, Aug 28, 2025 at 8:46 AM Becca King <beccaking@hopearizona.org> wrote:

Good morning,

Each year we need to update and approve our ADA policy for the ADOT grant. Unfortunately, this is due to ADOT before our meeting on the 11th. Please review and vote on whether you approve the attached policy. There were no major changes from last year. Any questions, please let me know. Thank you!

From: David O'Brien <dobrien.eds@gmail.com>
Sent: Thursday, August 28, 2025 2:52 PM
To: Becca King <beccaking@hopearizona.org>

YES
//dave

From: Chhatwal, Jasleen - (jchhatwal) <jchhatwal@arizona.edu>
Sent: Thursday, August 28, 2025 2:51 PM
To: sdgarber@hotmail.com; bethandmarkculbertson@gmail.com; Becca King <beccaking@hopearizona.org>

Ok to approve!

Jasleen Chhatwal, MBBS, MD, CPE, DFAPA

From: Scott Garber <sdgarber@hotmail.com>
Sent: Thursday, August 28, 2025 1:46 PM
To: bethandmarkculbertson@gmail.com; Becca King

<beccaking@hopearizona.org>

Yes

From: Elizabeth Culbertson <bethandmarkculbertson@gmail.com>
Sent: Thursday, August 28, 2025 8:50 AM
To: Becca King <beccaking@hopearizona.org>

I vote yes.

From: Courtney Broome <courtneyjab25@gmail.com>
Sent: Thursday, August 28, 2025 10:30 AM
To: Darrell Anthony <darrella168@gmail.com>

I vote yes

Thank you,

Courtney J Broome

From: Darrell Anthony <darrella168@gmail.com>
Sent: Thursday, August 28, 2025 10:26 AM
To: ashmatteson@hotmail.com

I vote yes.

From: Ashley Matteson <ashmatteson@hotmail.com>
Sent: Thursday, August 28, 2025 8:55 AM
To: bethandmarkculbertson@gmail.com; Becca King <beccaking@hopearizona.org>

Yes! Ashley Matteson

From: Ryan Daily <daily.ryan@gmail.com>
Sent: Thursday, August 28, 2025 4:20 PM
To: dobrien.eds@gmail.com
Cc: Becca King <beccaking@hopearizona.org
Yes to approve.