

# ***Title VI Plan***

## **Mont Alto Ambulance Association**

Board Approved:

Date 11/1/2023

## Policy Statement

The **Mont Alto Ambulance Association** as a recipient of Federal Transit Administration (FTA) grant dollars either directly from FTA or through the Pennsylvania Department of Transportation (PennDOT) will comply with the Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d) and the U.S. Department of Transportation implementing regulations.

## Title VI Plan Elements

The **MONT ALTO AMBULANCE ASSOCIATION's** Title VI plan includes the following elements:

1. Evidence of Policy Approval
2. Notice to the Public
3. Complaint Procedure
4. Complaint Form
5. List of transit related Title VI Investigations, Complaints and Lawsuits
6. Public Participation Plan
7. Language Assistance Plan
8. Governing Body Demographic Representation Information

*Note: Additional materials will be attached, if required.*

The **Mont Alto Ambulance Association** will review its policy at least once a year to determine if modifications are necessary.

## Policy Updates – Activity Log

Date	Activity (Review/Update/Addendum/ Adoption/Distribution)	Person Responsible	Remarks
11/1/2023	Board approval of Title VI Plan	Chief/Administrator	
11/1/2024	Reapproval of Title VI Plan by Board of Directors	Chief/Administrator	


## TITLE VI Notice to the Public

The **MONT ALTO AMBULANCE ASSOCIATION's** Notice to the Public is as follows:

Notifying the Public of Rights Under Title VI

### **MONT ALTO AMBULANCE ASSN.**

- ✓ The Mont Alto Ambulance Association operates its programs and services without regard to race, color, and national origin in accordance with Title VI of the Civil Rights Act. Any person who believes she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with the Mont Alto Ambulance Association.
- ✓ For more information on the Mont Alto Ambulance Associations civil rights program, and the procedures to file a complaint, contact 717-749-3453 ; email [montaltoamb@gmail.com](mailto:montaltoamb@gmail.com). ; or visit our administrative office at 603 S. Main Street, PO Box 327, Mont Alto, PA 17237. For more information, visit [montaltoamb@gmail.com](mailto:montaltoamb@gmail.com)
- ✓ A complainant may file a complaint directly with the Federal Transit Administration by filing a complaint with the Office of Civil Rights, Attention: Title VI Program Coordinator, East Building, 5<sup>th</sup> Floor-TCR, 1200 New Jersey Ave., SE Washington, DC, 20590.
- ✓ If information is needed in another language, contact 717-749-3453.  
*Si se necesita informacion en otro idioma de contacto, 717-749-3453*

The **MONT ALTO AMBULANCE ASSOCIATION's** Notice to the Public is posted in the following locations: *(check all that apply)*

- Mont Alto Ambulance Association website [www.montaltofire.com](http://www.montaltofire.com)
- Public areas of the Mont Alto Ambulance Association office (common area, public meeting rooms, etc.)
- Inside vehicles



## Title VI and ADA Complaint Procedure

The **Mont Alto Ambulance Associations** Title VI and ADA Complaint Procedure is made available in the following locations: *(check all that apply)*

- Mont Alto Ambulance Association website, either as a reference in the Notice to Public or in its entirety
  - Hard copy in the central office
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Any person who believes she or he has been discriminated against on the basis of race, color, or national origin by the **MONT ALTO AMBULANCE ASSOCIATION** may file a Title VI complaint by completing and submitting the Mont Alto Ambulance Association's Title VI and ADA Complaint Form.

The **MONT ALTO AMBULANCE ASSOCIATION** investigates complaints received no more than 180 days after the alleged incident. The **MONT ALTO AMBULANCE ASSOCIATION** will process complaints that are complete.

Once the complaint is received, the **MONT ALTO AMBULANCE ASSOCIATION** will review it to determine if our office has jurisdiction. The complainant will receive an acknowledgement letter informing her/him whether the complaint will be investigated by our office.

The **MONT ALTO AMBULANCE ASSOCIATION** has 30 days to investigate the complaint. If more information is needed to resolve the case, the agency 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 agency can administratively close the case. A case can be administratively closed also if the complainant no longer wishes to pursue their case.

After the investigator reviews the complaint, she/he will issue one of two (2) 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 Title VI or ADA violation and that the case will be closed.
- ✓ A letter of finding (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.

If the complainant wishes to appeal the decision, she/he has 30 days after the date of the letter or the LOF to do so.

A person may also file a complaint directly with the Federal Transit Administration, at FTA Office of Civil Rights, 1200 New Jersey Avenue SE, Washington, DC 20590.

If information is needed in another language, contact the Chief and/or Administrator @ 717-749-3453. Si necesita información en otro idioma, comuníquese con el Jefe y/o Administrador al 717-749-3453

## Title VI and ADA Complaint Form

The **MONT ALTO AMBULANCE ASSOCIATION's** Title VI and ADA Complaint Form is made available in the following locations: *(check all that apply)*

- Mont Alto Ambulance Association website, either as a reference in the Notice to Public or in its entirety
- Hard copy in the central office

<b>Section I:</b>				
Name:				
Address:				
Telephone (Home):			Telephone (Work):	
Electronic Mail Address:				
Accessible Format Requirements?	Large Print		Audio Tape	
	TDD		Other	
<b>Section II:</b>				
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
<b>Section III:</b>				
I believe the discrimination I experienced was based on (check all that apply):				
<input type="checkbox"/> Race* <input type="checkbox"/> Color* <input type="checkbox"/> National Origin* <input type="checkbox"/> 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.				
_____				
_____				
<b>Section IV</b>				
Have you previously filed a Title VI complaint with this Mont Alto Ambulance Association?			Yes	No



<b>Section V</b>		
Have you filed this complaint with any other Federal, State, or local Mont Alto Ambulance Association, or with any Federal or State court?		
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, check all that apply: <input type="checkbox"/> Federal Mont Alto Ambulance Association: _____ <input type="checkbox"/> Federal Court _____ <input type="checkbox"/> State Agency _____ <input type="checkbox"/> State Court _____ <input type="checkbox"/> Local Agency _____		
Please provide information about a contact person at the Mont Alto Ambulance Association/court where the complaint was filed.		
<b>Name:</b>		
<b>Title:</b>		
<b>Mont Alto Ambulance Association:</b>		
<b>Address:</b>		
<b>Telephone:</b>		
<b>Section VI</b>		
Name of Mont Alto Ambulance Association complaint is against:		
Contact person:		
Title:		
Telephone number:		

\* Indicates is specific to Title VI of the Civil Rights Act of 1964

You may attach any written materials or other information that you think is relevant to your complaint.

Signature and date required below

\_\_\_\_\_

Signature Date

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

**MONT ALTO AMBULANCE ASSOCIATION** Chief and/or Administrator  
 603 S. Main Street, PO Box 327  
 Mont Alto, PA 17237

**List of Transit Related Title VI Investigations, Complaints and Lawsuits**

The **MONT ALTO AMBULANCE ASSOCIATION** maintains a list or log of all Title VI investigations, complaints and lawsuits, pertaining to its transit-related activities.

**Check One:**

There have been no investigations, complaint and/or lawsuits filed against us since inception in 1979 – 2023..

\_\_\_\_\_

There have been investigations, complaints and/or lawsuits filed against us. *See list below. Attach additional information as needed.*

\_\_\_\_\_

	<b>Date</b> (Month, Day, Year)	<b>Summary</b> (include basis of complaint: race, color, or national origin)	<b>Status</b>	<b>Action(s) Taken</b>
<b>Investigations</b>				
1.				
2.				
<b>Lawsuits</b>				
1.				
2.				
<b>Complaints</b>				
1.				
2.				



## Public Participation Plan

### Strategies and Desired Outcomes

To promote inclusive public participation, the **MONT ALTO AMBULANCE ASSOCIATION** employs the following strategies, as appropriate:

- ✓ Complete monthly meetings open to the Association's membership
- ✓ Use social media in addition to other resources as a way to gain public involvement
- ✓ Respond promptly to telephone inquiries
- ✓ Periodic public fundraisers
- ✓ Public school visits, including Penn State

## Language Assistance Plan

### Plan Components

As a recipient of federal US DOT funding, the **MONT ALTO AMBULANCE ASSOCIATION** is required to take reasonable steps to ensure meaningful access to our programs and activities by limited-English proficient (LEP) persons.

Limited English Proficient (LEP) refers to persons for whom English is not their primary language and who have a limited ability to read, write, speak or understand English. This includes those who have reported to the U.S. Census that they speak English less than very well, not well, or not at all.

### Methodology

To determine if an individual is entitled to language assistance and what specific services are appropriate, the **MONT ALTO AMBULANCE ASSOCIATION** has conducted a *Four Factor Analysis*<sup>1</sup> of the following areas: 1) Demography, 2) Frequency, 3) Importance and 4) Resources and Costs.

#### *LEP Four Factor Analysis*

**Factor 1: Demography:** Identifies the number or proportion of LEP persons served and the languages spoken in the service area.

Mont Alto Ambulance Association researched data from the U.S. Census Bureau. According to the 2022 American Community Survey, 95.2% of persons in Franklin County speak only English. The survey did not include more granular data, but one can assume that since such a large percentage of Franklin County residents speak only English, the number of persons who are limited English proficient, is minimal. This data also indicates that Mont Alto Ambulance Association does not trigger a safe harbor threshold; therefore, translation of critical documents is not required.

**Factor 2: Frequency:** Identifies the frequency staff (and transit provider/lessee, if applicable) comes into contact with LEP persons.

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<sup>1</sup> DOT LEP guidance <https://www.transportation.gov/civil-rights/civil-rights-awareness-enforcement/dots-lep-guidance>

Mont Alto Ambulance Association questioned staff and was unable to identify any instance where an individual seeking to interact with Mont Alto Ambulance Association required language assistance.

**Factor 3: Importance:** Explains how the program, service or activity affects people’s lives.

Mont Alto Ambulance Association provides critical transportation services to persons in serious need. These services are invaluable to person’s lives. Being a rural area, transportation to and from home, nursing homes, hospitals, doctor appointments etc is a critical area of concern for seniors and disabled individuals. Our services go beyond the scope of what other local public transportation can provide which is one on one non-medical wheelchair or litter van transports.

**Factor 4: Resources and Costs:** Discusses funding and other resources available for LEP outreach.

Mont Alto Ambulance Association identified two resources, should language assistance be necessary:

1. Utilize a professional language interpreter and/or translator. One such translator/interpreter is called Language Line Solutions.
2. Reach out to public school foreign language teachers. We have a Spanish teacher who is willing to help as well as a member of the Mont Alto Volunteer Fire Department who also speaks and interprets Spanish.

Mont Alto Ambulance Association serves an area where language assistance is required only rarely, but since the program is critical to person’s lives, we are committed to providing assistance as needed through translation or outreach to foreign language teachers in local schools.

### Demographic Representation Information

**A. Demographic Representation Table<sup>2</sup>**

The table below depicts US Census county population data by race and **Mont Alto Ambulance Association’s** non-elected committees/councils related to transit.

Body	Caucasian	Hispanic/ Latino	Black/ African American	Asian American	Native American	Two or More Races
Franklin County Population <sup>3</sup>	86.3%	7.0%	4.4%	1.1%	0.3%	2.3%
Mont Alto Ambulance Association Governing Body	100%	0%	0%	0%	0%	0%

<sup>2</sup> County data by race is available at the U.S. Census Bureau website:  
<https://www.census.gov/quickfacts/fact/table/franklincountypennsylvania,US/PST045222>

<sup>3</sup> May not add to 100%, because of multiple race self-identifying



## **B. Efforts to Encourage Minority Participation**

**Mont Alto Ambulance Association** understands diverse representation on committees, councils and boards results in sound policy reflective of its entire population. As such, **Mont Alto Ambulance Association** encourages participation of all its citizens.

As vacancies on non-elected boards, committees and councils become available, **Mont Alto Ambulance Association** will make efforts to encourage and promote diversity.

To encourage participation on its boards, committees and councils, **Mont Alto Ambulance Association** will continue to reach out to community organizations to connect with all population groups in its service area. In addition, **Mont Alto Ambulance Association** will use creative ways to make participating realistic and reasonable, such as scheduling meetings at times best suited to its members.



Attachment A. Documentation of Approval by Governing Body

Authorized Official Resolution

Be it RESOLVED, that the Mont Alto Ambulance Association/Mont Alto Volunteer Fire Department of Franklin County hereby has reviewed and adopts the attached Title VI Plan.

Be it FURTHER RESOLVED, that Mont Alto Ambulance Association does hereby designate DANNY E REED (President MAVFD/MAAA) as the official to execute all documents.

I COURTNEY LEIDIG duly qualified Secretary of the MAVFD/MAAA hereby certify that the attached minutes are a true and correct copy of the Executive Board Meeting held 11/1/2023 pertaining to the review and adoption of the Title VI Plan and that the plan was approved by a majority of members present.

Be it FURTHER RESOLVED that the Title VI Plan will be reviewed/updated and reapproved yearly by majority members of the Executive Board and will remain in effect as of that date noted within the plan documents.

MONT ALTO AMBULANCE ASSOCIATION  
FRANKLIN COUNTY PENNSYLVANIA

Courtney Leidig  
SECRETARY

11/1/2023  
DATE

Title VI Plan Document 2023 Ambulance Forms