

# *Annual LAO Compliance Report for 2024-2025*

## *Department of Homelessness and Supportive Housing (HSH)*

### **SUMMARY OF COMPLIANCE CHANGES**

#### **1. FY 2024-2025**

1. Please provide a summary of all language access changes in your Department since FY 2023-2024.

#### **SUMMARY OF COMPLIANCE REPORT CHANGES & KEY BARRIERS**

A. Explain changes in strategies and procedures to improve language access and/or comply with the LAO (as amended in 2024), and indicate whether these changes have improved the Department's language access services from the previous year.

Description of Change	Improved Language Access Services?
Increased number of certified bilingual staff at HSH.	No
Continued annual purchase order's with language agencies we work with.	Yes
Changes in the Homeless Management Information System (HMIS- The "ONE" System) - to better capture language	Yes

B. Indicate any key barriers that have prevented your Department from achieving your LAO goals and any proposed solutions.

Barriers	Proposed Solutions
Most of HSH's services are contracted out, and we work with contractors to support their language access but it is not always consistent. Due to the Department's expansion	HSH will continue to explore how to empower provider partners to budget for bilingual staff and interpretation services.

of LEP services, the costs of these services are prohibitive.	
There is no way with current technology to count the number of people using interpretation services at virtual public meetings. This may lead to inefficiencies in our use of funds for interpretation services.	HSH will work with our vendors and communications teams to think about creative ways to better target our interpretation funding.
Due to limitations on funding for language access, we are restricted to the three threshold languages for community meetings and public postings.	HSH will continue to request additional funding over the year to incorporate the most frequently used languages accessed on our website and reported in the ONE System to improve accessibility over time.
HSH anticipates the need to expand bilingual certified staff to ensure accessibility.	HSH continues to explore this expansion of bilingual certified staff through their Programs Division, in collaboration with HR, to assesses this need and hire as appropriate.

## II. DEPARTMENTAL GOALS

### 2.Assessment of Progress in Meeting Previous Year's Goals

Please provide an update on how your department is meeting your current goals. These are the goals that your department indicated in last year's report.

1. The department has reevaluated its telephonic interpretation policy to allocate more funding toward in-person interpretation and translations. To do this the department has reassigned the responsibility of telephonic interpretation services to our nonprofit partners via contracting.
2. The department maintained the same amount of bilingual certified staff from FY 23-24 in FY 24-25.
3. The Department added multilingual options to the San Francisco Homeless Outreach Team's voicemail.
4. The department has increased community coverage by dividing out community engagement and communications work and hiring designated community engagement liaisons.
5. HSH has hired a senior-level public information officer who will take a more proactive approach in website maintenance, accessibility, and all digital translations.

### 3.Goals for Fiscal Year 2025-2026

Please provide a description of your department's Language Access Ordinance goals for Fiscal Year 2025-2026 (bullet points).

1. Successfully implement newly established HSH LAO policy to reflect new requirements added through legislation passed in 2024.

2. Expand efforts to recruit bilingual staff, focusing on increasing staff who speak languages aligned with the needs of our population, and in compliance with externally initiated departmental restructuring.
  3. Improve existing staff trainings and engagement regarding the clarification of policies and the process for requesting and providing interpretation and translation services to LEP clients.
  4. Develop clear, accessible, and responsive web translations for the HSH's new website on [SE.gov](http://SE.gov).
  5. Improve effort to provide translation services via community engagement and communications work.
- Implement expansion of Vietnamese in our regular translations.

## III. CLIENT INFORMATION

### 4. Primary/Preferred Language Information

Do you collect and record primary/preferred language data on clients as part of your intake or application process?

Yes

### 5. Data Collection Method

What method did you use to determine the number and percentage of limited English proficient (LEP) persons who actually used your department's services citywide during FY 2024-2025

*See OCEIA Guidance, Section I*

\* You may measure this information by: 1) analyzing information collected during the Department's intake process for all clients; or 2) conducting an annual survey of all contacts with the public made by the Department during a period of at least two weeks; or 3) analyzing and calculating the annual total number of requests for telephonic translation (interpretation) services. If you use the survey method, please pro-rate your results to produce estimated totals for the full year. For example: data from a two-week survey should be multiplied by 26; data from a one-month survey should be multiplied by 12.

Please provide the method you used to determine the number LEP persons actually served.

- a. ☒ Intake      b. ☐ Annual Survey      c. ☐ Number of telephonic interpretation requests

Description (Optional)

### 6. Number of LEP Persons who Used Department's Services During FY 2024-2025"

a. Please indicate the total number of clients who used the Department's services and the total number of LEP persons who used your department's services city wide during FY 2024-2025.

Do not leave blank. For numeric fields, enter 0 if none

*See Guidance, Section I*

\* You may measure this information by: 1) analyzing information collected during the Department's intake process for all clients; or 2) conducting an annual survey of all contacts with the public made by the Department during a period of at least two weeks; or 3) analyzing and

calculating the annual total number of requests for telephonic translation (interpretation) services.

If you use the survey method, please pro-rate your results to produce estimated totals for the full year. For example: data from a two-week survey should be multiplied by 26; data from a one-month survey should be multiplied by 12.

TOTAL CLIENTS (#)	LEP CLIENTS (#)	LEP CLIENTS BY LANGUAGE (#) ?						
		CAN	FIL	MDRN	RUS	SPN	VIET	Other
37,472	6,576	169	84	85	97	5,589	48	504 Other

Key: CAN = Cantonese

FIL = Filipino (Tagalog)

MDRN = Mandarin

RUS = Russian

SPN = Spanish

VIET = Vietnamese

Please indicate the number of clients served in other languages:


LANGUAGE	LEP CLIENTS (#)
French	27
Samoan	25
Hindi	23
Tigrinya	20
Amharic	18
Japanese	11
Korean	6
Turkish	55
Portuguese	32
Ukrainian	11
Urdu	8
Farsi	8
Mongolian	7
Dari Persian	6
Punjabi	6
Yemenese	5
Dari	4
Persian	4
Tagalog	4
Nepali	4
Cambodian	4
Italian	4
Thai	4
Burmese	3
Susu	3
Kurdish	3

Curdish	3
German	3
Navajo	3
Swahili	3
Khmer	2
Mayan	2
Moroccan	2
Slovenian	2
Mayan Yucatan	2
Somali	2
Hungarian	2
Laotian	2
Gujarati	2
Uzbek	2
Hmong	2
Creole	2
Mam	2
Myanmar	1
Polish	1
Estonian	1
Italian, Spanish	1
Indonesian	1
Serbia	1
Puerto Rican	1
Dhuluo	1
Zulu	1
Hindi	1
Berber	1
Malayam	1
Cambodian, Vietnamese	1
Romanian	1
Indigenous Language	1
African	1
Krio	1
Curdish, Turkish	1
Farsi, Persian	1
Nigerian	1
Hebrew	1
Serbian	1
Indigenous Language of Guatamala	1



Translated Materials	172	48	51	0	53	7	2	Simplified Chinese - 9
Number of Vital Documents	172	48	51	0	53	7		2

b) Please submit a cumulative list of all of the Department's written materials (e.g. applications, forms, notices of rights, program material, web or other digital content, etc.) that have been translated, the language(s) into which they have been translated, and the persons who have reviewed the translated materials for accuracy and appropriateness.

Please upload your Translated Materials Log as an Excel file	Your file is uploaded  <a href="#">Download Blank Excel Template</a>
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If there are major increases or decreases in the reported numbers compared to last year's report, please explain the reason for the change: \_\_\_\_\_

## 8. Telephone-Based Language Services

Describe any telephone-based Language services used for FY 2024-2025 (July 1 through June 30). Please include information on call volumes and language use. If your department uses multiple telephone-based interpretation services, which may include LanguageLine Solutions, other vendors, or internal staff, please indicate each on a separate line.

Do not leave blank. For numeric fields, enter 0 if none.

What telephonic language services were used?	Total Call Volume (LEP Clients)	Total Call Volume by Language							
		CAN	FIL	MDRN	RUS	SPN	VIET	Other #1 (Specify)	Other #2 (Specify)
Language Line	1,202	58	0	117	24	831	2	170	Turkish, Arabic, French, Portuguese, Burmese, Dari, Pulaar, Pashto, Amharic, Hindi, Indonesian, Portuguese, Tigrigna, Japanese

If your Department reported significant increases or decreases compared to the numbers reported last year, please explain the reason for the change: \_\_\_\_\_

## 9. In-Person Interpretation Services

How many times did multilingual employees provide in-person interpretation and in-language services) in FY 2024-2025 (July 1 through June 30)? Please include information on the number of times in-person interpretation and in-language services was provided in each language.

Do not leave blank. For numeric fields, enter 0 if none

See Guidance, Section II (c)

Total	Number of Times Interpretation Provided, by Language							
	CAN	FIL	MDRN	RUS	SPN	VIET	Other #1 (Specify)	Other #2 (Specify)
5					5			

Description (Optional)

If your Department reported significant increases or decreases compared to the numbers reported last year, please explain the reason for the change: \_\_\_\_\_

10. Oral Interpretation at Public Meetings

How often did your Department provide oral interpretation at public meetings or hearings during FY 2024-2025? Please indicate the number of meetings/hearings and languages provided and whether vendors or multilingual employees were used.

Do not leave blank. For numeric fields, enter 0 if none.

Number of Interpreted hearings/meetings	17
Total Number of LEP Attendees	17
Interpretation provided by	<input checked="" type="checkbox"/> Vendors <input type="checkbox"/> multilingual Employees <input type="checkbox"/> Other(describe)
Interpretation provided in (languages)	<input checked="" type="checkbox"/> Cantonese <input type="checkbox"/> Filipino <input checked="" type="checkbox"/> Mandarin <input type="checkbox"/> Russian <input checked="" type="checkbox"/> Spanish <input type="checkbox"/> Vietnamese <input checked="" type="checkbox"/> Other (describe) ASL



If there are major increases or decreases in the reported numbers compared to last year’s report, please explain the reason for the change: \_\_\_\_\_

# V.MULTILINGUAL STAFFING AND TRAINING

## 11. Multilingual Employees

a) How many multilingual public contact employees does your department have, and how many have had their multilingual skills tested and certified by the Department of Human Resources (DHR)? Indicate the language(s) spoken by certified multilingual employees and all multilingual employees.


	Total Number	Number or Multilingual Staff, by Languages						
		CAN	FIL	MDRN	RUS	SPN	VIET	Other
Certified Multilingual Public Contact Employee	11	4	0	4	0	7	0	0
Total Multilingual Public Contact Employee	11	4	0	4	0	7	0	0
All Public Contact Employees	11							
All Certified Multilingual Employees (public contact and non-public contact)	11							

Description (Optional)

Please provide a roster of all your department's Multilingual Employees (including those employees who are self-designated as competent in a language other than English). Use additional pages as needed. See Roster of Multilingual Employees from OCEIA.

ROSTER OF MULTILINGUAL EMPLOYEES							
							DHR

Name	Title	Office Location	Languages (other than English)	Certified? (Y/N)

Please upload your Roster of Multilingual Employees as an Excel file	Your file is uploaded  <a href="#">Download Blank Excel Template</a>
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b) Assess the number of additional multilingual employees needed in FY 2025-2026 and beyond to meet the requirements of the Language Access Ordinance.

Is the current number of multilingual employees adequate to meet LAO requirements?	If no, indicate the number of additional multilingual employees needed and corresponding language(s)
No	

If you have indicated that the number of multilingual employees in your Department is inadequate to meet the requirements of the Language Access Ordinance, please state your Department's plans to meet those requirements

HSH currently uses Language Line and other contractors to meet LAO requirements.
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## 12. Employee Development and Training

a) Which of the following methods does your Department use to verify the quality of multilingual employees' language proficiency skills?

<input checked="" type="checkbox"/>	DHR multilingual certification
<input type="checkbox"/>	External certification process
<input type="checkbox"/>	Other method (describe):
<input type="checkbox"/>	Our Department does not have a method to verify the quality of multilingual employees' language proficiency skills

b) Does your Department offer training for public contact staff on how to provide language assistance services to LEP individuals?

Yes
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The Department held two trainings in FY2024-25 regarding the LAO requirements at our All Staff
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## VI. LANGUAGE SERVICE AND COMMUNICATION PROTOCOLS

### 13. Language Access Policies

Please provide a brief summary of your Department's procedures for providing services to LEP persons, using the boxes below.

#### LANGUAGE ACCESS POLICIES AND PROTOCOLS

a) Does your department have a written Language Access Policy ?	Yes
b) Please provide a brief summary of the policy.	The policy covers how the Department of Homelessness and Supportive Housing staff will provide services and information to Limited English Proficient speakers. This includes updates from changes made to the Language Access Ordinance for FY24-25.
c) Please upload your department's full Language Access Policy.	Your file is uploaded 
d) Does your department work with clients in crisis or emergency situations ?	Yes
If yes, please describe the nature of crisis or emergency situations (e.g., fire, natural disaster, domestic violence, other).	other
e) Does your department have a protocol for providing language access services to LEP persons in crisis or emergency situations?	Yes
If yes, please provide a brief summary of your Department's protocol for serving LEP persons in crisis or emergency situations, including the use of multilingual staff for assisting LEP persons and the translation of any warning signs.	<p>The Department contracts with community providers to conduct a majority of our services to the public. HSH has certified bilingual employees that work within our adult housing, street outreach, and housing placement programs, which serves people who are currently or formerly experienced homelessness. While very few HSH staff are in public contact positions, those who are have been trained to support LEP clients in crisis.</p> <p>Additionally, several members of the Homeless Outreach Team (which includes both HSH public contact staff and contractors from Heluna Health) have Spanish language capacity and can engage with unhoused clients experiencing crises. Contracted</p>

providers that do not have bilingual staff are funded to develop their own internal language access policies and procedures.

## 14. Recorded Telephonic Messages

a) Please list any recorded telephonic messages that are available in languages other than English, and describe the content of recorded messages (e.g. office hours and location; information about programs and services; other types of assistance).

CONTENT OF RECORDED MESSAGE	LANGUAGE (Mark all boxes that apply)						
	CAN	FIL	MDRN	RUS	SPN	VIET	Other (specify)
Office Hours and Location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information about Programs and Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please describe)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b) Assess the availability and quality of your department's recorded telephonic messages in languages other than English .

Excellent

Please explain.

The HSH office is not a front door to services in the homelessness response system, so we do not prioritize information about our office hours or location in the recorded voicemail.

## 15. Telephonic Requests for Translation or Interpretation Services

a) Describe your Department's procedures for handling telephonic requests for translation or interpretation services.

Our procedure is included in the HSH Language Access Policy.

b) Assess the quality of your department's procedures for handling telephonic requests for translation or interpretation services.

***See Guidance, Section IV (b)***

Adequate

**Please explain.**

HSH staff are able to use Language Line to provide interpretation services to clients over the phone.

## **16. In-Person Requests for Translation or Interpretation Services**

a) Describe your Department's procedures for handling in-person requests for translation or interpretation services.

Our procedure is included in the office Language Access Policy included as an attachment to this report.

b) Assess the quality of your department's procedures for handling in-person requests for translation or interpretation services.

***See Guidance, Section IV (c)***

Adequate

**Please explain.**

Our department manages in-person requests for translation and interpretation services across multiple platforms. We utilize a range of resources, including Language Line, contracted language service providers, and certified bilingual staff. Our Language Access liaison conducted multiple trainings this year to all staff and to public contact staff to ensure staff are knowledgeable about internal department policies and procedures.

## **17. Public Notices of Availability of Language Access Services**

a) For in-person or over-the-counter contacts, please indicate whether there is a visible notice posted in a public place informing LEP persons of their right to request translation or interpretation, and the languages that these notices are printed in.

Public notices are posted informing LEP persons of their right to request language access in the following languages:

<input checked="" type="checkbox"/>	Filipino
<input checked="" type="checkbox"/>	Chinese

<input type="checkbox"/>	Russian
<input checked="" type="checkbox"/>	Spanish
<input type="checkbox"/>	Vietnamese
<input type="checkbox"/>	Other (describe below) *

b) Assess the quality of the translation and visibility of your department's public notices of availability of language access services.

*See Guidance, Section IV (d)*

Adequate
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**Please explain.**

Notices and resources at 440 Turk are available in all threshold languages and can be accessed in our front lobby. Our lobby staff are equipped with the necessary knowledge and tools to assist all individuals seeking information. Additionally, staff are trained to access Language Line services to ensure effective communication and to help direct individuals to the appropriate resources.

## VII. BUDGET AND EXPENDITURES FOR LANGUAGE SERVICES

### 18. Language Services Expenditures in FY 2024-2025

Please provide the following information on the actual expenses for Language Services provisioning during the reporting period.

Language Access Services	FY 2024-2025 Actual Expenses
1. Compensatory pay for multilingual employees who perform multilingual services, excluding regular annual salary expenditures.	\$18,300.00
2. Telephonic interpretation services provided by vendors.	\$14,197.47
3. Document translation services provided by vendors.	\$22,539.16
4. Website translation services provided by vendors	\$0.00
5. On-site language interpretation services provided by vendors.	\$11,291.00
6. Other costs associated with providing language access services (e.g., grants, special programs, other.) Describe these	\$2,379.44

expenses in question 18.b.	
7. Total Language Services Expenses (add columns 1-5)	\$68,707.07

## 18 b. Other Costs: Description

Describe the expenses listed under “other costs associated with providing language access services” (line 6 above). Enter N/A if you reported no expenses in line 6 above.

This cost is the total amount of funds spent specifically on remote interpretation for virtual meetings.

## 18 c. Department's Total Operating Budget FY 2025-2026

\$742,400,000.00

## 19. Projected Language Services Budget in FY 2025-2026

What is your total projected budget to support progressive implementation of your Department's language service plan in FY 2025-2026 ?

*See Guidance, Section V (b)*

TOTAL	95000
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Description (Optional)