**Disability Advisory Commission (DAC) Follow up Questions for 211 Sacramento**

1. What kinds of services are specifically targeted towards people with disabilities? How are those identified or indicated in the database?
	1. We use a taxonomy system to classify each program/service listing in our database. The taxonomy terms are the search terms that staff use to find programs. The categories within the taxonomy are tailored to health and human services and consist of several levels that are increasingly more specific. For example, Housing is a broad level category. Within Housing, we have the more specific categories of Emergency Shelter and Housing Expense Assistance, among other more specific categories. Another layer that can be applied on these categories is Target Populations. This category includes populations like individuals with disabilities and health conditions, which also can have increasing levels of specificity. For example, within this category are individuals who are homebound or deaf individuals.

Our Information & Referral (I&R) Specialists are trained to use this taxonomy system to search our database for programs and services that best meet the caller’s needs. The I&R Specialist will assess the caller for demographic information that may return resources that are specifically tailored for particular demographics, like individuals with disabilities.

We also invite agencies to present their services and programs to our call center staff, regularly. Recently, we had a presentation from Resources for Independent Living, which our staff appreciated and reported learning a lot from.

1. What information is in the database regarding accessibility of services being referred, including proximity to public transit? How is accessibility assessed or verified?
	1. We list the accessibility for the agencies themselves, but typically not proximity to public transit. To assess for accessibility of services, we ask the agencies if their physical location is fully accessible to individuals using mobility aids and if they have designated, accessible parking spaces. The information provided by the agency is detailed on the program listing. We also ask the agencies for language accessibility, including American Sign Language.

We are in the process of researching the use of the 5-1-1 Sacramento tool to find public transit information in replacement of Google Maps transit data. We plan to use this tool to update our resource listings with the nearest public transit stops to agencies with physical locations. We also plan to train call center staff to use the 5-1-1 Sacramento tool to help inform callers regarding public transportation options and distances from transit stops to agencies.

1. What training does call center staff have for effective communication and sensitive interaction with people with disabilities? If trained, what is the content of the training and how much time is allotted for staff training in this area?
	1. Our call center staff go through extensive training during onboarding and receive ongoing training throughout their time with 211. The general trainings that staff complete teach empathetic and compassionate listening, perspective-taking, and effective communication. Staff also complete special topics trainings, like providing assistance for individuals with disabilities.

During onboarding, staff complete more than 40 hours of training before taking live calls. Throughout their tenure with 211, we provide special topics trainings at least 2 times per month. In addition, staff have one-on-one meetings with management once per month.

1. Is the website/database accessible to people using screen readers or other adaptive software?
	1. We utilized the screen reader, Microsoft Narrator, to assess the readability of our website using screen readers. We found that our Homepage had a few issues with readability and took this as an opportunity to improve it. In particular, we have a menu bar that the screen reader is unable to read. In addition, we were using a carousel that rotated through images directing the user to different webpages and/or programs. We removed the carousel, instead opting to have all of the images displayed with text and links. We copied the information from the menu bar to the main page for better accessibility for a screen reader. After these updates, our homepage is navigable using a screen reader on several web browsers: Chrome, Edge, and Firefox. The updates are a partial solution and we are working towards updating the entire website for accessibility. Thank you for the opportunity to review our website and make these updates.

For public-facing resource listings, we use a program that is provided to us by our database software, iCarol. Using Microsoft Narrator, the screen reader can read much of the information on the pages. It reliably skips the ‘Coverage Area’ section of our resource listings using Chrome. However, we typically have that information within our eligibility sections, which can be read by the screen reader. Unfortunately, we do not have control over the readability of these resource listings, but we have reached out to iCarol to request updates to the public-facing resource listings in order to make them more completely accessible to screen readers.

For our tests, we used the screen reader, Microsoft Narrator. However, if you have suggestions of other tools we could use to evaluate the accessibility of our website, we are more than open to those.

1. Have program documents been assessed for accessibility? (For example, the PDF program flyer appeared to have some issues with reading order using the voice function.)
	1. Thank you for the suggestion. We were able to update this flyer and another flyer we have on our website for accessibility. We tested it using Microsoft Narrator.

We are also using the screen reader to assess the accessibility of all social media graphics that we post and, moving forward, will update graphics, as necessary.

1. What background and experience do the 211 call center staff have that would help them understand the needs of people with disabilities?
	1. Our staff come from a broad cross section of backgrounds, with experience in social services, psychology, direct services for specific groups like seniors, as well as lived experience utilizing and navigating social services in their own lives. When recruiting staff, we prioritize individuals with relevant education and direct service experience, as well as the lived experience of coming from underserved populations. In addition, our staff receive regular training in empathy, compassionate listening, and perspective taking.
2. Is the call center facility accessible for staff with disabilities, for example physical work station and equipment, and other accommodations for call center staff?
	1. Yes, our call center is fully accessible for individuals with disabilities. However, since the beginning of the COVID-19 pandemic, most of our staff work from home. In the case that someone would like to work from the call center and is in need of reasonable accommodations, we are happy to accommodate and have done so in the past. In addition to having accessible desk spaces, we can provide accommodations like screen readers and magnification.
3. What kind of response/assistance will be rendered to a homebound person with a disability who calls in to request someone to come to their residence to test them for any virus that is considered epidemic and/or to be administered the vaccination for the specific virus?  Note: This question is not limited only to the COVID-19 variants.  We are internationally at the brink of declaring monkey pox and polio to be at an epidemic level.
	1. 2-1-1 Sacramento is an Information and Referral help line and is an independently operated non-profit. We work closely with Sacramento County, but we are not part of the County system of departments. We keep updated on County programs so that we can be a point of access to information about public health. We are in regular communication with the County about services that they provide. They share this information with us, as the information becomes ready for the public. We update our resource listings in accordance with the information that is shared with us.

The County ceased the in-home COVID-19 vaccination program on August 31, 2022. However, they are launching a new program to assist completely homebound individuals access to the COVID-19 vaccine. The new program has a stricter eligibility requirement than the previous iteration. The program will launch October 1, 2022. Clients may call 2-1-1 Sacramento to request an in-home vaccine. For those who are not eligible but who are interested in in-home services, including testing for COVID-19 or MPX, they will need to reach out to their specific health provider for their options. We can provide this level of information to callers about programs, as well as link them to Sacramento Covered, who can refer them to health navigators. However, 2-1-1 is limited to providing information on how to access health navigators; 2-1-1 does not provide health navigation.