

CALIFORNIA 2-1-1 ACCESS POLICIES AND STANDARDS

I. Overview

- A. From the earliest planning for 2-1-1 service in California we have said that “the 2-1-1 service provider must offer effective access to people with disabilities.” The intent of this paper is to provide detail about what that means.

II. Access to service

- A. All callers will have access to a professional I&R Specialist 24 hours a day, 7 days a week.
 - 1. All I&R Specialists will have been trained in disability sensitivity issues and disability service procedures.

III. Language

- A. Service will be available in all languages that will be encountered in the service provider’s community. Multi-lingual service may be provided by agency staff or translation service.
 - 1. If a translation service is used it must follow professional standards, including confidentiality.

IV. Defaults

- A. A default for any reason will route the call to the queue for the next available I&R Specialist. A default will never terminate the call.

V. Response time

- A. Extended response time (time-outs) will be built into the central routing system. A time-out (lack of input during the time allowed) defaults to the queue for a Specialist.
 - 1. The extended response time is intended to facilitate response via relay operators and/or persons with disabilities who need a longer time to process information or who have dexterity issues.

VI. Menus

- A. Menus will be facilitated by the central routing system. However, the choice of whether or not to use menus will be a local decision. If the local agency uses menus it will write the menus itself
- B. Menus are typically used to route calls by language (e.g., English, Spanish, or other) and/or by major service group (e.g., food, shelter, other).
 - 1. Menus will not be used to circumvent professional I&R service as defined in the AIRS National Standards.
 - 2. There are special cases where simple, unambiguous information provided by a menu completely meets the caller’s needs. Examples include providing a list of shelter locations during major disasters or locations where immunizations are available.
- C. There must be clear, limited menu choices at any one level. Three choices is the desirable limit; four choices is the normal maximum (special circumstances such as a major disaster might require adding additional choices).

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- D. The caller must be given a simple, one-step method for exiting the menu at any time and going on queue for the next available Specialist.
- E. The caller must be given a one-step entry for repeating the menu choices and another one-step entry for going back to the main menu.
- F. Any unexpected response or a lack of response defaults to the queue for a Specialist.

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VII. TDD/TTY (TDD) Access

- A. People using TDDs will be able to access service by dialing 2-1-1. The central routing system will distinguish an incoming call as either TDD or voice and route it to the appropriate terminal at the local service provider.
- B. All 2-1-1 service providers will provide TDD access and staff trained in TDD use on all shifts.
- C. TDD service will be provided in all languages either by agency staff or translation service.

VIII. Interactive Voice Response (IVR)

- A. IVR menu inputs will be implemented by the central routing system.
 - 1. IVR will be in addition to, not in place of, push-button menu systems.
- B. The IVR will be programmed to achieve the maximum flexibility for atypical speech patterns and accents. We incorporate the work done by the Forum on IVR Accessibility into these standards.
- C. We will explore whether it is technically feasible to enable IVR input from TDDs (Baudot) and will do so if it is.
- D. We understand that development of an IVR application with maximum accessibility may not be completed by the time that 2-1-1 is implemented.

IX. New technologies or procedures

- A. New technologies or procedures will be adopted when they overcome access barriers for some people without creating disadvantages for others.
 - 1. It is understood that technologies or procedures may not provide advantages for all users (e.g., extended time-outs are not an advantage for many users but do not disadvantage them either).

X. Oversight and modification

- A. All local 2-1-1 service providers are strongly urged to include experts and advocates on disability access issues in local 2-1-1 Steering or Oversight Committees.
- B. The California Alliance of Information & Referral Services will be receptive to input concerning access issues and will work with the centralized routing system and/or local service providers, as appropriate, to correct access problems.