

Title VI Plan (IDOT)

CORNERSTONE SPECIAL CARE 2026

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Adopted on: 07/01/2024

Adopted by: Cornerstone Special Care Human Rights Committee

Revised on: 07/20/2026

This plan is hereby adopted and signed by:

Executive Name/Title: Melissa Francque, Executive Director

Executive Signature: *Melissa Francque*

Executive Summary

Cornerstone Special Care is a licensed Medically Complex Facility for Individuals with Developmental Disabilities located in Sterling, Illinois. Cornerstone Special Care provides 24-hour residential, skilled nursing, developmental training, and support services to adults with severe or profound intellectual and developmental disabilities.

Cornerstone Special Care provides transportation to residents for medical appointments, community activities, programs, services, and other authorized purposes. Transportation is also provided to employees only while they are accompanying or supporting residents or otherwise conducting authorized Cornerstone Special Care business. Cornerstone Special Care does not provide employee commuting services or operate a fixed-route transportation service for the general public.

Cornerstone Special Care is administered by an Executive Director, with department leaders responsible for nursing, residential and developmental services, human resources, activities, maintenance, transportation, and other facility operations. Section 5310 vehicle funds are used to support safe and accessible transportation for Cornerstone Special Care residents.

Cornerstone Special Care has participated in the Section 5310 grant program since 2009 and does not receive funds directly from the Federal Transit Administration.

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 receiving direct funds from FTA?

☐ If yes, please attach a copy of your FTA letter of approval of Title VI Plan.

☒ No

Non Discrimination Notice to the Public

Notifying the Public of Rights Under Title VI and ADA CORNERSTONE SPECIAL CARE

CORNERSTONE SPECIAL CARE 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 they have been subjected to an unlawful discriminatory practice may file a complaint with the **CORNERSTONE SPECIAL CARE**.

For more information on the **CORNERSTONE SPECIAL CARE's** civil rights program, and the procedures to file a complaint, contact **Melissa Francque, Executive Director, 815-626-5820 ext 200, email info@cornerstonespecialcare.org**; or visit our administrative office at **815 W. 23rd Street, Sterling, Illinois 61081**. For more information, visit **cornerstonespecialcare.org**.

Complaints may be filed directly with the Illinois Department of Transportation (**IDOT**) **Civil Rights Office**. ATTN: Title VI Program Coordinator 2300 S Dirksen Parkway, Suite 317, Springfield, IL 62764 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 **815-626-5820 ext 200**. *Para información en Español llame: **815-626-5820 ext 200**

Non Discrimination Notice to the Public - Spanish

Aviso Público Sobre los Derechos Bajo el Título VI Y ADA CORNERSTONE SPECIAL CARE

CORNERSTONE SPECIAL CARE (*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 **CORNERSTONE SPECIAL CARE**, y los procedimientos para presentar una queja, contacte **Melissa Francque, Executive Director 815-626-5820 ext 200**, o visite nuestra oficina administrativa en **815 W. 23rd Street, Sterling, Illinois 61081**. Para obtener más información, visite **cornerstonespecialcare.org**

Una queja puede ser presentada con la oficina de Derechos Civiles del Departamento de Transporte de Illinois (**IDOT**). Atención: Title VI Program Manager, 2300 S Dirksen Parkway, Suite 317, Springfield, IL 62764 o con la Administración Federal de Transporte (**FTA**). Atención: Title VI Coordinator, 1200 New Jersey Ave., SE Washington DC 20590

This notice is posted online at **cornerstonespecialcare.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 **CORNERSTONE SPECIAL CARE** 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 **CORNERSTONE SPECIAL CARE** 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 **CORNERSTONE SPECIAL CARE** or submitted to the State or Federal authority for guidance.

- (7) **CORNERSTONE SPECIAL CARE** will notify the IDOT Civil Rights Office of ALL Discrimination complaints within 72 hours via telephone at (217) 782-2762; or email at DOT.Complaint@illinois.gov.
- (8) **CORNERSTONE SPECIAL CARE** 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 IDOT within **72** hours of that decision. Letters may be submitted by hardcopy or email.
- (11) A complainant dissatisfied with **CORNERSTONE SPECIAL CARE** decision may file a complaint with the Illinois Department of Transportation (**IDOT**) or the Federal Transit Administration (**FTA**) offices of Civil Rights: **IDOT**: ATTN ADA/Title VI Program Coordinator 2300 S Dirksen Parkway, Suite 317, Springfield, IL 62764 **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: cornerstonespecialcare.org.

If information is needed in another language, contact **815-626-5820 ext 200**. *Para información en Español llame: **815-626-5820 ext 200**

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
<i>*If you answered "yes" to this question, go to Section III.</i>		
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 IV:		
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:

CORNERSTONE SPECIAL CARE

Melissa Francque, Executive Director

815 W. 23rd Street, Sterling, Illinois 61081

815-626-5820 ext 200

info@cornerstonespecialcare.org

A copy of this form can be found online at **cornerstonespecialcare.org**

Public Participation Plan

CORNERSTONE SPECIAL CARE provides opportunities for residents, guardians, family members, employees, referral sources, and other stakeholders to receive information and provide feedback regarding its programs and transportation services. Communication methods are selected based on the needs and abilities of the individuals affected.

As an agency receiving federal financial assistance, **CORNERSTONE SPECIAL CARE** made the following community outreach efforts and activities to engage minority and Limited English Proficient populations since the last Title VI Plan submittal to IDOT CRO.

- ☒ Updated agency website

CORNERSTONE SPECIAL CARE will make the following community outreach efforts for the **upcoming year**:

- ☒ Maintain Title VI and ADA information on the agency website.
- ☒ Post nondiscrimination notices in the main public area and public transportation vehicles if applicable.
- ☒ Continue communication with residents, guardians, family members, employees, referral sources, and other stakeholders.
- ☒ Provide language assistance and accessible formats upon request.
- ☒ Review public-facing policies and documents for accessibility and clarity.

Limited English Proficiency Plan

CORNERSTONE SPECIAL CARE 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 **CORNERSTONE SPECIAL CARE** 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 plan updates. In developing the plan while determining the **CORNERSTONE SPECIAL CARE**'s extent of obligation to provide LEP services, the **CORNERSTONE SPECIAL CARE** undertook a U.S. Department of Transportation four-factor LEP analysis which considers the following:

- 1) Cornerstone Special Care reviewed available demographic information for its service area and its records regarding residents, guardians, applicants, employees, and other persons who may interact with its programs. During the review period, Cornerstone Special Care documented no requests for language assistance related to limited English proficiency.
- 2) During the review period, Cornerstone Special Care documented zero contacts requiring language assistance because of limited English proficiency.

CORNERSTONE SPECIAL CARE's staff reviewed the frequency with which care providers have, or could have, contact with LEP persons for **any given year**. **CORNERSTONE SPECIAL CARE** averages **0** contacts per **year**.

- 3) The nature and importance of the program, activities or services provided by the **CORNERSTONE SPECIAL CARE** to the LEP population.
- 4) The resources available to **CORNERSTONE SPECIAL CARE** and overall costs to provide LEP assistance. A brief description of these considerations is provided in the following section.

CORNERSTONE SPECIAL CARE provides a statement in Spanish and will for additional languages specific to the LEP community make up that will be included in all public outreach notices. Every effort will be made to provide vital information to LEP individuals in the language requested.

Safe Harbor Provision for written translations

CORNERSTONE SPECIAL CARE 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 upon request:

- (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 as applicable. Vital documents include the following:

- (1) Notices of free language assistance for persons with LEP
- (2) Notice of Non-Discrimination and Reasonable Accommodation
- (3) Communications with residents and their guardians

1) **CORNERSTONE SPECIAL CARE** provides language assistance services through the below methods:

- ☒ Cornerstone Special Care will provide language assistance through a qualified bilingual employee whose proficiency has been assessed or through a qualified external interpretation or translation service when needed.
-

2) **CORNERSTONE SPECIAL CARE** has a process to ensure the competency of interpreters and translation service through the following methods: A qualified bilingual employee whose proficiency has been assessed.

CORNERSTONE SPECIAL CARE 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. **CORNERSTONE SPECIAL CARE** will train the interpreter or translator in specialized terms and concepts associated with the agency's policies and activities. **CORNERSTONE SPECIAL CARE** 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. **CORNERSTONE SPECIAL CARE** 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) **CORNERSTONE SPECIAL CARE** provides notice to LEP persons about the availability of language assistance through the following methods:

- ☒ Cornerstone Special Care provides notice of available language assistance through its website, nondiscrimination notices, admission or intake communications, complaint procedures, public-facing documents, and direct communication with residents, guardians, applicants, employees, and other stakeholders.

4) **CORNERSTONE SPECIAL CARE** monitors, evaluates and updates the LEP plan through the following process:

CORNERSTONE SPECIAL CARE 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. **CORNERSTONE SPECIAL CARE** will make changes to the language assistance plan based on feedback received. **CORNERSTONE SPECIAL CARE** may take into account the cost of proposed changes and the resources available to them. Depending on the evaluation, **CORNERSTONE SPECIAL CARE** 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. **CORNERSTONE SPECIAL CARE** 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) **CORNERSTONE SPECIAL CARE** 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. **CORNERSTONE SPECIAL CARE** will implement processes for training of staff through the following procedures:

CORNERSTONE SPECIAL CARE 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. **CORNERSTONE SPECIAL CARE** 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. **CORNERSTONE SPECIAL CARE** 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. **CORNERSTONE SPECIAL CARE** will implement LEP training to be provided for agency staff. **CORNERSTONE SPECIAL CARE** staff training for LEP to include:

- A summary of the **CORNERSTONE SPECIAL CARE** responsibilities under the DOT LEP Guidance;
- A summary of the **CORNERSTONE SPECIAL CARE** language assistance plan;
- A summary of the number and proportion of LEP persons in the **CORNERSTONE SPECIAL CARE** 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 **CORNERSTONE SPECIAL CARE** cultural sensitivity policies and practices.

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.

☒ **CORNERSTONE SPECIAL CARE** 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.

☒ **CORNERSTONE SPECIAL CARE** does not have any subrecipients and therefore does not monitor subrecipients for Title VI compliance.

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.

☒ **CORNERSTONE SPECIAL CARE** 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: (can be expressed in writing or in table format – see Circular Appendix G & H pp. 87-91)

☒ **CORNERSTONE SPECIAL CARE** is not a Fixed Route Transit Provider

Board Approval for the Title VI Plan

Cornerstone Special Care Human Rights Committee reviewed and approved the Title VI Plan on 7/20/2026.