

Instructions

Step 1- Click on the link to access the electronic Bilingual Designation Form

https://lf_intweb1.rivcoca.org/Forms/BilingualForm

Step 2- Fill out all the required fields. Fields that are marked with an asterisk. (*)

Requestor Information

	Bilingual De	esignation H	Request
Important: All Please ensure all required fields are	required fields are n populated before si	narked with a tubmitting the E	*. Bilingual Request Form.
The Bilingual request is for? * 🔾 From Recruitment	 Existing County 	y Employee	
Supervisor: * Abe Manager Phone: * (951) 955-3500 Date:	11/07/2023	Email: * amanager@rivco.org Email to receive updates status for BDR
		Additio	onal Email: admingroup@rivco.org Optional email to receive updates status
Complete this form to validate an employee used to cancel an employee's bilingu reviews/approvals and routing to Human Re	as bilingual and al pay. Comple sources.	l request Bil etion of t	ingual Pay. This form can also be his form will allow electronic

- From Recruitment should be selected if the candidate selected was a direct result of a bilingual required recruitment.
- Existing County Employee should be selected if there is a current employee internal to the Department that is bilingual and the Department would like to request bilingual pay for translations.

Note regarding status updates: The email address listed on the top of the form will be the email address that will receive all the status updates for the bilingual form. HR recommends that the email address listed should be a shared email address that is responsible for tracking all bilingual forms for the Department. You may add up to two email addresses to receive automated status updates on the progress of the form once it is submitted to Human Resources.



Section I – Employee Information

Section I:	Employee Information
Employee First Name: * Employee La	st Name: * Employee ID#: *
Department Name: *	Second Language Required: * Value is required.
Bilingual Pay Request*	TAP Employee*
New Change Cancel If Canceling proceed to Section IV	Yes No Is Employee TAP?
Has the employee previously completed the County of River	rside bilingual exam?* 💿 Yes 🔿 No
If "Yes" Please provide their personal email address*	
Are bilingual skills required to perform essential duties of t	he job?*
Will the employee perform bilingual translations at least or	nce a day or 5 times per week either verbally or in writing?*
Validate Employee as Bilingual (Check Level Required)	Value is required.

*O Level 1 (BC1): Employee communicates verbally in a second language as a requirement of their position.

O Level 2 (BC2): Employee communicates both verbally and in writing in a second language as a requirement of the position.

O Level 3 (BC3): Employee communicates complex technical, medical, AND legal information in a second Language.

- Fill in the employee information, language requested, type of request, and level requested.
 Tip: If you enter the employee ID first, the First Name, Last Name and Job Title fields will auto populate.
- Complete the request type (New, Change, Cancel), and whether the employee is TAP.
 - If you mark "YES" under TAP Employee, you will be required to select the specific Department the employee will be assigned to.
- If the employee has previously completed the County of Riverside bilingual exam answer "yes" and enter the employee's personal email address. The HR Test Administrator will use the personal email research the previous exam results.
- Answer questions regarding the language requirements.
- Select the Level being requested.
 Note: Spanish is the only language that can be compensated up to level 3. Other languages are only eligible for bilingual level I compensation.



Section II - Justification

Section II: Just	tification
Please provide a detailed explanation for bilingual compensation. Expla written), essential duties requiring bilingual skills, and the frequency in	anation must include: Type of translation being used (verbal o a which the use of a second language is required. *
Note: Must enter text in field above, even if your uploading the Justification. (Example: Justification Upload Justific Justification U File types that are allowed	To avoid delays in the approval process, provide a clear and detailed explanation for the bilingual requirement.

- Provide a brief summary or justification regarding the need for bilingual translations. You also have the option to upload the justification in document form. The acceptable file types are .pdf, .doc, .docx only.

Section III – Testing Information

This section is **ONLY** required if the **<u>Request is From Recruitment</u>**.

Section III: Testing Information			
Upload the employee's certification or proof of passing test scores using the Exam Results Upload below. Certification/proof is available from the HR Recruiter.			
Effective Date: *			
💼 Upload Results*			
Must be a beginning of a pay period or date of hire if hired from a bilingual list. Cannot precede date tested.	Exam Results Upload File types that are allowed "pdf, doc, docx"		

- When a request is for an employee *From Recruitment* you will complete the same steps on the form as *Existing County Employee* as well as Section III with an effective date and upload results.
- When selecting an effective date it <u>must be on a pay period or the employee's date of hire</u>.
 - \circ $\;$ Please note that the effective date cannot precede the date tested.



- A certificate will be provided by the recruiter (sample below). The certificate must be uploaded under *Upload Results*.
 - If the recruitment is a mass recruitment, the recruiter may provide a spreadsheet with a list of names that passed the bilingual exam from the recruitment. This may substitute for the certificate.
 - Please ensure that the document is in an acceptable format to upload; .PDF, .DOC., .DOCX.

Step 3- Acquire signature from Reviewer (optional), Manager and Department Head.

Section IV - Department/Service Team Approval

Section IV: Department/Service Team Approval

Submission Departmental Approval Information

Important Notice:

The "<u>Save as Draft</u>" is now only to be used by the employee populating the form to save his/her work without losing the data already inputted who is not ready to send it to a Reviewer / Approving member of their internal Department. The "<u>Save as Draft</u>" email is not to be passed around your "Internal Department" for reviewing or approving the form. There is now an "Internal Department" process to review and get the required signatures by your department before submitting the form to Human Resources.

Below is the explanation of the different types of "Internal Department" Approval Paths

- Reviewer Employee to review or add additional information such as Budget/Finance, Administration. (Optional)
- · Manager The Department Manager that needs to Sign and Approve the Form before sending to Department Head / Designee.
- · Additional Approver Employee to Sign and Approve the form before sending to Department Head / Designee. (Optional)
- Department Head The Department Head or Designee that is required to Sign and Approve Form and submit to Human Resources.

Note: "Reviewer" / "Additional Approver" are Optional and may be skipped in the process unless your department process requires them to review or approve the form before sending to the Department Head / Designee for submission to Human Resources. Department Head / Designee is the last step in the "Internal Department" Process.

Departmental Review / Approval* O Reviewer Manager	This option will sen approving the proce reviewer, Manager, Note : This will not for your Departmer	This option will send the form to the next employee for reviewing and or approving the process for your Department . (ex: Budget/Finance, Additional reviewer, Manager, Etc.) Note : This will not submit the form to HR for the approval process. This is for your Departmental process.		
Department Name must be populated, or field will be blank. Assign To: *	Send to Manager	NOTE: If the reviewer/manager's name is not listed, please have the individual contact the RCIT Helpdesk at <u>https://rivcoitprod.service-now.com/</u> or (951) 955-9900 and have them request a Laserfiche Forms Participant license.		



- Once you have completed the form, you're ready to seek approvals from your departmental reviewers, hiring managers and Department heads. You will have two options to choose from, Manager and Reviewer.
 - Please note that each Department has different approval process flows and levels of approvals for bilingual requests. If you are unsure of who needs to sign off, please check with your administration.
- Select "Reviewer" if there's an employee that needs to review the form before sending the form to the manager. This is likely someone in an administrative unit within your department.
- Select "Manager" if the next person to approve the form is your direct supervisor or manager.
- Next, select the name of the reviewer or manager that you are sending the form to. The assign to box will have a drop-down of the reviewers and managers. Once you select the appropriate reviewer/manager, depending on your department's process, you have the option to send to manager, send to reviewer or save as draft.

IMPORTANT: If the reviewer or manager's name is not listed, please have the individual contact the RCIT Helpdesk at <u>https://rivcoitprod.service-now.com</u> or (951) 955- 9900. They need to request a *Laserfiche Forms Participant license*.

- If you submit the form to the reviewer/ manager, an email notification will be sent to them requesting their review or approval. An example of the email is below.



ACTION RE	QUIRED: New - Bilingual	Designation Form for B	rian Arcinas ne	eds approve	ed		_
Ifforms@rivco.org			← Reply	Reply All	→ Forward	1	
0 10	Arcinas, Brian				wed to/ i	8/2023 :	54 PW
Arcinas, Brian:							
You have been a	assigned a manager task for your d	epartment to Sign and Approve	a New - Bilingual De	signation for Br	ian Arcinas, BDR	# 6295	
Please Click the	link below to login to Laserfiche to	Sign and Approve accordingly.					
Click here to op	en this task in Forms.						
			If the m	anagar bag			
	Organization	~	account	anager nas t. thev will s	s a Rivco.or	g on	
	Username		Windows Authentication button and be automatically directed to the form.				
			If the re	viewer/mar	nager <u>does</u>	not	
	Password	Forgot password?	have a	rivco.org ac	count they	need	d to
			rivcoca	username	in the use	a Frnan	ne
			and the	ir password	d.		
	Sign In						
	This is a public comput	er					
	□ I have an MFA code						
	OR						
	Sign in wi	th:					
	Windows Authe	ntication					
	©2023 Laser	iche					

- When the reviewer/manager is ready to view the form, the reviewer/manager must simply click on the link and a Laserfiche login will appear.
 - If the manager has a rivco.org account, they will simply click on Windows Authentication button and be automatically directed to the form.
 - If the reviewer/manager <u>does not</u> have a rivco.org account they need to login to Laserfiche by entering rivcoca\username in the user name and their password.
- Once the manager has reviewed the information on the form is ready to sign, they will click the certify box then click *Sign* to create an electronic signature, then select the current date.



Certify*	I certify that this position requires bilingual skills and meets the required conditions set forth in the applicable MOU or Management Resolution.			
Manager's Signature/	Designee: *	Date:*		
	Sign	Ē		
Manager Appro	val Information			
	lm	portant Notice:		
 Reviewer - Employe Additional Reviewer Department Head - 	ee to review not approve Form. (Ex. Financ er - Employee who may approve/sign Form The Department Head that needs to Sign a	ials. Etc.) (Optional) . (Optional) and Approve Form.		
Note: Reviewer and A approve, sign, or review	dditional Reviewer are optional and may be w the form before submitting to the Dept He	e skipped in the process unless your department process requires them to ad/Designee for approval.		
Departmental Review	/ Approval * O Reviewer O Additional Reviewer O Department Head	This option will send the form to the next person for reviewing and or approving for your Department. (ex: Reviewer, Additional reviewer, Manager, Etc.) Note: This will not submit the form to HR for the approval process. This is for your Departmental process.		
Assign To: *	~	NOTE: Please review your department's internal proce for the appropriate time for sending the form for Department Head signature.		
Comments		2000 characters left		
		6		
E: If the reviewer/ is not listed, pleadual contact the l ps://rivcoitprod.se 51) 955-9900 and est a Laserfiche F pipant licenso	manager's Submit ase have the RCIT Helpdesk ervice-now.com/ I have them forms	Cancel Request		

- At this point the <u>manager</u> is ready to send to the form to the next person for signature. There are three options for the Department Review and Approval: Reviewer, Additional Reviewer and Department Head.
 - Select *Reviewer* if you would like an in individual to review the form such as a person from the Finance Department.
 - Select *Additional Reviewer* if there is someone else that needs to sign and approve the form prior to sending the form to the Department Head.
 - Select *Department Head* to forward the form to your Department Head to sign and approve.



IMPORTANT: In the event the name of the Reviewer, Additional Reviewer, or Department Head you wish to send to is not listed please have the individual contact the RCIT Helpdesk at https://rivcoitprod.service-now.com/ or (951) 955- 9900. They must request a *Laserfiche forms Participant license*.

- In the example below, the Department Head is the next signature, and had been selected from the drop-down in the *Assign To* list.
 - Please review your department's internal process for the appropriate time for sending the form for Department Head signature.
- Optionally, you may add comments and then Submit.

Department Head Signature

Department	Head	Signature
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Certify*	I certify that this position the applicable MOU or I	n requires bilingual skills and meets the required conditions set forth in lanagement Resolution.
Department Head Sig	gnature/Designee: *	Date:*
	Sign	
Comments		2000 characters left
	Su	mit to HR Cancel Request

- The Department head will receive an email notification similar to the hiring manager and must follow the same steps to access and review the form.
- Once the form reaches the final level approval, the form is submitted and routes to HR to continue and complete the bilingual process.

BILINGUAL VALIDATION/PAY REQUEST PROCEDURES

(Applies Only to Employees in SEIU, LIUNA, and Management, Confidential and Other Unrepresented Units)

Employees currently receiving bilingual pay will continue to receive their current rate of pay (\$.25 per hour for Class 1 or \$.50 per hour for Class 2 for all hours worked) as long as they continue in their current position and meet the former requirements for bilingual pay (Class 1: perform bilingual translation as a part of their job function and regular duties at least 10% of the time; Class 2: perform bilingual translation before an officially convened court, appeals board, commission or hearing body in addition to their regular duties, or assigned to a position designated as requiring bilingual skills 50% or more of the time) or until their position is designated by their department as requiring/desiring a higher level of bilingual skill.

Departments may now designate positions as bilingual positions and eligible for one of the new levels of bilingual compensation. To qualify for the new compensation, departments must verify that their position(s) require the use of a second language at least five times per week or once per day. Employees hired into these positions must have their bilingual skills certified to receive the new bilingual compensation.

Levels and Compensation:

- Level 1: Basic oral communication; employees at this level perform bilingual translation Compensation: \$.50 per hour worked
- Level 2: Task completion; employees at this level perform bilingual translation, as well as written translation Compensation: \$.75 per hour worked
- Level 3: Complex written translation, and medical and legal interpretation; employees at this level perform complex verbal and written translation Compensation: \$1.00 per hour worked

Payments will be prorated based on the hours worked.

Procedures:

To establish positions as eligible for one of the new bilingual levels, departments must designate a position as eligible for bilingual pay at either Level 1, 2 or 3 by completing the <u>Bilingual Validation/Pay Request</u> Form and sending it to their designated Human Resources Services Manager for approval.

Vacant Positions:

If the position is vacant, the <u>Candidate Requisition Form</u> (CRF) must be included to initiate the recruitment. Human Resources will conduct the recruitment, test applicants for bilingual skill level and other skills, and refer for hiring consideration only those applicants that pass the required tests.

Current Employees:

Qualified employees, whose positions are designated by their department as requiring/desiring bilingual skills, may test for the higher skill levels if required by their department. Departments requiring this must complete the <u>Bilingual Validation/Pay Request</u> <u>Form</u> indicating the employee to be tested, and send it to their designated Human Resources Services Manager. The Human Resources Testing Center will make arrangements for the testing and will notify the department and employee of the results. Employees will receive the new bilingual compensation at the beginning of the pay period following certification of the higher level skill.