



MENTAL RETARDATION BULLETIN

COMMONWEALTH OF PENNSYLVANIA · DEPARTMENT OF PUBLIC WELFARE

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January 20, 2005

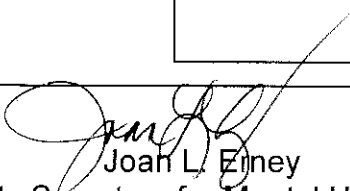
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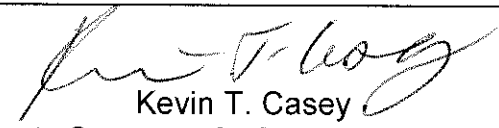
SUBJECT:

Limited English Proficiency (LEP)

BY:


Joan L. Finney
Deputy Secretary for Mental Health and
Substance Abuse Services

BY:


Kevin T. Casey
Deputy Secretary for Mental Retardation

SCOPE

County MH/MR Administrators
Base Service Unit Directors
State Mental Hospital Superintendents
Public ICF/MR Directors
NonState ICF/MR Directors

PURPOSE

The purpose of this Bulletin is to provide information regarding Title VI of the 1964 Civil Rights Act as it pertains to Limited English Proficiency (LEP) and note the federal requirements designed to assure meaningful access to federally funded services for persons with LEP.

BACKGROUND

Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color or national origin in any program or activity receiving federal funds. It requires programs providing federally funded services to provide language assistance to persons with Limited English Proficiency (LEP) in an effort to ensure meaningful access to needed services.

The United States Department of Health and Human Services (HHS), Office of Civil Rights (OCR), gave the Department of Public Welfare (DPW) a copy of its policy guidance "*Title VI Prohibition Against National Origin Discrimination As It Affects Persons With Limited English Proficiency*," and the policy was revised in August 2003.

The Department of Public Welfare issued a *Limited English Proficiency Policy Statement* that requires each program office to review the effectiveness of existing language assistance efforts and to develop policies and procedures for ensuring compliance with Title VI.

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO THE APPROPRIATE MENTAL HEALTH OR MENTAL RETARDATION REGIONAL PROGRAM MANAGER.

It also requires ongoing staff training along with a process to monitor effectiveness at the local level. A copy of this policy statement is attached with this Bulletin.

DISCUSSION

To ensure the availability of consistent language assistance, the Office of Mental Health and Substance Abuse Services (OMHSAS) and the Office of Mental Retardation (OMR) initiated a joint program of technical assistance to assist in the areas of assessment of language need, developing policies and procedures to ensure access to language assistance resources, training the trainer, and monitoring for quality improvement.

A jointly prepared LEP survey was sent to each County MH/MR Administrator, each State Hospital Director, and to each public and NonState ICF/MR Director. The survey results indicated varying areas where assistance might be needed, and OMHSAS and OMR will provide technical assistance upon request.

The following procedures are necessary in order to meet Title VI requirements:

- Each County MH/MR Program, State Mental Hospital, and public or NonState ICF/MR providing federally funded services is required to have policies/procedures for ensuring language assistance services to people who have limited proficiency in English.
- The policy/procedure should include a statement noting that each individual will be assessed regarding their proficiency in the English language.
- Documentation noting the individual's need for language assistance and the resources utilized should appear in the individual's record.
- Each facility should assess language assistance resources and develop a resource bank accessible to all staff members needing to provide services to a person with LEP.
- A procedure for ongoing staff training.
- A procedure for monitoring compliance with Title VI (can be part of the facility's quality management program).

The attached materials are for informational purposes and action as applicable:

- LEP Fact Sheet – Office of Civil Rights published facts and information pertaining to LEP.
- Sample Policy on Communications with LEP Persons – Office for Civil Rights LEP Sample Policy.
- DPW LEP Policy Statement – Outlines guidelines for DPW's LEP Policy.
- LEP Presentation – Power Point that is utilized for LEP training purposes.

<p>COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO THE APPROPRIATE MENTAL HEALTH OR MENTAL RETARDATION REGIONAL PROGRAM MANAGER.</p>



FACT SHEET



U.S. Department of Health and Human Services • Office for Civil Rights • Washington, D.C. 20201 • (202) 619-0403

Language Assistance to Persons with Limited English Proficiency (LEP).

To ensure that persons with limited English skills can effectively access critical health and social services, the Office for Civil Rights (OCR) published policy guidance which outlines the responsibilities under federal law of health and social services providers who receive Federal financial assistance from HHS to assist people with limited English skills. The guidance explains the basic legal requirements of Title VI of the Civil Rights Act of 1964 (Title VI) and explains what recipients of Federal financial assistance can do to comply with the law. The guidance contains information about best practices and explains how OCR handles complaints and enforces the law. You can print out a copy of the guidance from OCR's website at <http://www.hhs.gov/ocr> or contact one of the OCR Regional Offices listed below.

Background

Title VI and its implementing regulations provide that no person shall be subjected to discrimination on the basis of race, color or national origin under any program or activity that receives Federal financial assistance. The courts have held that Title VI prohibits recipients of Federal financial assistance from denying LEP persons access to programs, on the basis of their national origin.

The Title VI Language Assistance Obligation

Any organization or individual that receives Federal financial assistance, either directly or indirectly, through a grant, contract or subcontract, is covered by Title VI. Examples of covered entities include hospitals, nursing homes, home health agencies, HMOs, health service providers, and human services organizations. All organizations or individuals that are recipients of Federal financial assistance from HHS have an obligation to ensure that LEP persons have meaningful and equal access to benefits and services.

Under Title VI, recipients of Federal financial assistance from HHS must take steps to ensure that LEP persons can meaningfully access health and social services. A program of language assistance should provide for effective communication between the service provider and the LEP person so as to facilitate participation in, and meaningful access to, services.

Compliance With the Language Access Requirement - Summary of Guidance

The key to ensuring meaningful access for LEP persons is effective communication. An agency or provider can ensure effective communication by developing and implementing a comprehensive written language assistance program that includes policies and procedures for identifying and assessing the language needs of its LEP applicants/clients, and that provides for a range of oral language assistance options, notice to LEP persons of the right to language assistance, periodic training of staff, monitoring of the program and, in certain circumstances, the translation of written materials.

Agencies and providers have a number of options for providing oral language assistance. Which option to use will depend on a variety of factors including the frequency of need and size of the population(s) being served. Examples of the options available include:

- Hiring bilingual staff for patient and client contact positions
- Hiring staff interpreters
- Contracting for interpreter services
- Engaging community volunteers
- Contracting with a telephone interpreter service

The necessity to translate written documents also may vary depending on several factors including the size of the population(s) being served and the size of the agency or provider. As part of its overall language assistance program, an agency or provider must develop and implement a plan to provide written materials in languages other than English where a significant number or percentage of the population eligible to be served, or likely to be directly affected, by the program needs services or information in a language other than English to communicate effectively. If the number or percentage of the population eligible to be served is not significant, then the agency or provider may not need to translate written documents. Even when written translations are not dictated by need, agencies and providers still must provide oral interpretation of written documents, if necessary, to ensure meaningful access for a LEP person.

Examples of Prohibited Practices

Examples of practices which may violate Title VI are:

- Providing services to LEP persons that are more limited in scope or are lower in quality than those provided to other persons;
- Subjecting LEP persons to unreasonable delays in the delivery of services;
- Limiting participation in a program or activity on the basis of English proficiency;
- Providing services to LEP persons that are not as effective as those provided to those who are proficient in English; or
- Failing to inform LEP persons of the right to receive free interpreter services and/or requiring LEP persons to provide their own interpreter.

Compliance and Enforcement

OCR will enforce recipients' responsibilities to LEP beneficiaries through procedures provided for in the Title VI regulations. These procedures include complaint investigations, compliance reviews, efforts to secure voluntary compliance and technical assistance. OCR will always provide recipients with the opportunity to come into voluntary compliance prior to initiating formal enforcement proceedings. In determining compliance with Title VI, OCR's concern will be whether the recipient's policies and procedures allow LEP persons to overcome language barriers and participate meaningfully in programs, services and benefits. A recipient's appropriate use of the methods and options discussed in the guidance will be viewed by OCR as evidence of a recipient's intent to comply with Title VI.

Additional Information

Anyone who believes that he/she has been discriminated against because of race, color or national origin may file a complaint with OCR within 180 days of the date on which the discrimination took place. The OCR Regional Offices are listed below:

Region I - Boston (Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont)
Regional Manager, Office for Civil Rights
U.S. Department of Health and Human Services
Government Center
J.F. Kennedy Federal Building - Room 1875
Boston, MA 02203
Voice phone (617) 565-1340
FAX (617) 565-3809
TDD (617) 565-1343

Region II - New York (New Jersey, New York, Puerto Rico, Virgin Islands)
Regional Manager, Office for Civil Rights
U.S. Department of Health and Human Services
Jacob Javits Federal Building
26 Federal Plaza - Suite 3312
New York, NY 10278
Voice Phone (212) 264-3313
FAX (212) 264-3039
TDD (212) 264-2355

Region III - Philadelphia (Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia)
Regional Manager, Office for Civil Rights
U.S. Department of Health and Human Services
150 S. Independence Mall West
Suite 372, Public Ledger Building
Philadelphia, PA 19106-9111
Voice Line (215) 861-4441
FAX (215) 861-4431
TDD (215) 861-4440

Region IV - Atlanta (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee)
Regional Manager, Office for Civil Rights
U.S. Department of Health and Human Services
Atlanta Federal Center, Suite 3B70
61 Forsyth Street, S.W.
Atlanta, GA 30303-8909
Voice Phone (404) 562-7886
FAX (404) 562-7881
TDD (404) 331-2867

Region V - Chicago (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin)
Regional Manager, Office for Civil Rights
U.S. Department of Health and Human Services
233 N. Michigan Ave., Suite 240
Chicago, IL 60601
Voice Phone (312) 886-2359
FAX (312) 886-1807
TDD (312) 353-5693

Region VI - Dallas (Arkansas, Louisiana, New Mexico, Oklahoma, Texas)
Regional Manager, Office for Civil Rights
U.S. Department of Health and Human Services
1301 Young Street, Suite 1169
Dallas, TX 75202
Voice Phone (214) 767-4056
FAX (214) 767-0432
TDD (214) 767-8940

Region VII - Kansas City (Iowa, Kansas, Missouri, Nebraska)
Regional Manager, Office for Civil Rights
U.S. Department of Health and Human Services
601 East 12th Street - Room 248
Kansas City, MO 64106
Voice Phone (816) 426-7278
FAX (816) 426-3686
TDD (816) 426-7065

Region VIII - Denver (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)
Regional Manager, Office for Civil Rights
U.S. Department of Health and Human Services
1961 Stout Street - Room 1185 FOB
Denver, CO 80294-3538
Voice Phone (303) 844-2024
FAX (303) 844-2025
TDD (303) 844-3439

**Region IX - San Francisco (Am. Samoa,
Arizona, California, Guam, Hawaii, Nevada)**
Regional Manager, Office for Civil Rights
U.S. Department of Health and Human Services
50 United Nations Plaza - Room 322
San Francisco, CA 94102
Voice Phone (415) 437-8310
FAX (415) 437-8329
TDD (415) 437-8311

**Region X - Seattle (Alaska, Idaho, Oregon,
Washington)**
Regional Manager, Office for Civil Rights
U.S. Department of Health and Human Services
2201 Sixth Avenue - Suite 900
Seattle, WA 98121-1831
Voice Phone (206) 615-2287
FAX (206) 615-2297
TDD (206) 615-2296



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE FOR CIVIL RIGHTS**

**SAMPLE POLICY ON COMMUNICATING WITH LIMITED ENGLISH
PROFICIENT PERSONS¹**

POLICY:

No person will be denied equal access to services based on his/her inability, or limited ability, to communicate in the English language.

PURPOSE:

To effectively communicate with limited English proficient (LEP) persons to ensure their meaningful access to services and benefits.

GUIDELINES:

The LEP person will be made aware, at each entry point for services, that he/she may request the services of an interpreter, or other appropriate communication aids, provided by the facility. This notification will be made verbally by staff, be posted at entry points throughout the facility, and/or, be printed on forms and brochures. **A person's request for communication assistance will be noted in his or her record.**

The procedure and information necessary for securing qualified² foreign language interpreters will be readily available to all staff members, especially those who are in direct contact with patients, (e.g., physicians, nurses, aides, billing clerks, etc...).

Staff members will be instructed that it is the facility's obligation to ensure effective communication with LEP persons, not the LEP individuals' responsibility.

If the facility utilizes in-house staff as interpreters, these staff members will be appropriately trained.³

¹Federal fund recipients should maintain a similar policy on communicating with deaf/hard of hearing and speech impaired persons.

²According to the Americans with Disabilities Act of 1990, a "qualified" sign language interpreter is an individual "who is able to interpret effectively, accurately, and impartially both receptively and expressively, using any necessary specialized vocabulary." The Office for Civil Rights recommends that, whenever possible, a foreign language interpreter be similarly qualified.

³A recipient should ensure that it uses persons who are competent to provide interpreter services. Competency does not necessarily mean formal certification as an interpreter, though this certification generally is preferable. However, the competency requirement does contemplate proficiency in both English and the other language, orientation or training which includes the ethics of interpreting, and fundamental knowledge in both languages of any specialized terms and concepts peculiar to the recipient's program or activity.

The facility will ensure ready access to community and/or contract interpreter resources. These resources will be utilized in the event the facility does not have sufficient and/or competent in-house interpreter resources and in the event in-house interpreter resources are not available for a specific language or at a specific time. All costs incurred through the use of a contract interpreter will be paid by the facility.

All staff members will be instructed not to require/request that LEP persons utilize family members, especially children, or friends as foreign language interpreters. Family or friends' emotional involvement with an LEP person can jeopardize interpretation/translation of critical information. Additionally, family or friends may not be adequately versed in the specialized terminology required for communication between the LEP person and the provider. A person's own interpreter should only be used at the request of the LEP person, and when use of that individual would not compromise the effectiveness of services or violate the LEP person's confidentiality. An LEP person's request to use his/her own interpreter will be noted in the person's record.

Similarly, staff members will be instructed not to utilize other persons awaiting services in the waiting area as interpreters. In addition to the issue of interpreter competency, LEP persons, like all members of the general public, have a right to keep medical or personal information about themselves confidential.

All vital documents will be translated into appropriate languages and made readily available to LEP persons. Site translation of written materials available only in English will be provided as needed.

The language assistance program developed by the facility will be monitored on a periodic basis to measure its effectiveness. Modifications to the program will be made whenever necessary to ensure that LEP persons have meaningful access to the facility's services.

SAMPLE COMMUNICATION PROCEDURE

All staff members should follow the following steps in order to secure foreign language interpreter services:

Step 1. _____

Step 2. _____

Step 3. _____

Step 4. _____

Instructions for staff on securing foreign language interpreters should be provided in order of preference of communication resource. For example, if a facility maintains a list of in-house qualified interpreters, staff should be instructed to utilize this communication resource before utilizing a supplemental resource such as the AT&T Language Line or communication cards.

FOREIGN LANGUAGE INTERPRETER LIST

Staff Interpreters:

<u>Name</u>	<u>Position</u>	<u>Language</u>	<u>Shift</u>	<u>Phone</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Community Resource/Contract Interpreters:

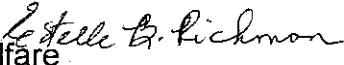
<u>Name</u>	<u>Language</u>	<u>Phone</u>	<u>Special Instructions</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

A copy of the above list is maintained at the following locations throughout the facility:

Facility staff members are notified of the facility's guidelines and procedures for securing appropriate communication services through the following method(s):

Other communication aids available include: _____

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

DATE: SEP 21 2004
SUBJECT: Limited English Proficiency Policy Statement
TO: All DPW Employees
FROM: Estelle B. Richman 
Secretary of Public Welfare

In accordance with Title VI of the Civil Rights Act of 1964, the Department of Public Welfare (Department), is committed to establish and maintain practices that will ensure meaningful access to the Department's services and benefits by persons with Limited English Proficiency (LEP). This policy statement supercedes any prior communication regarding the Department's mandate that program offices provide services and benefits to persons with limited English proficiency.

It is the policy of the Department of Public Welfare to ensure that no person is denied access to services and benefits as the result of the inability or limited ability to communicate in the English language.

The Deputy Secretary for Administration, Mr. Michael Stauffer, is responsible for oversight of the Department's compliance with federal LEP requirements. Ms. Wendy Chan is the current LEP Coordinator within the Office of Administration. Ms. Chan is located in the Bureau of Equal Opportunity, Room 223 Health & Welfare Building, telephone number (717) 783-0274.

It is the responsibility of each program office to ensure through its contracts, grants, or other means, that contractors, subcontractors, grantees, and sub grantees ensure meaningful access to benefits and services for individuals with LEP. Each office, as appropriate, shall establish protocols for monitoring its contractors and grantees for Civil Rights compliance.

Each program office shall operate in conjunction with the LEP Coordinator to develop protocols to guide their operations and receive approval from the LEP Coordinator before implementing any LEP procedure. These protocols and procedures, must address methods for ensuring compliance in each of the following areas: Assessment, Language Access, Training of Staff and Monitoring.

For the assessment of needs, the program office must:

- Estimate number of persons/households with LEP and preferred language
- Identify languages for which interpreter services (both oral and written) will or may be needed
- Determine individual language needs
- Record individual language needs
- Identify language assistance contact person in each office
- Identify location and availability of resources
- Identify timely access process

Based on the above assessment, the program office must establish procedures to provide for language access with:

- Notice of availability of language services to persons with LEP
 - It is the responsibility of the service provider to notify applicants and recipients of the availability of oral and written language services at no cost to the recipient.
 - The provider may NOT request or require the use of family members (including children) and/or friends as an interpreter.
- Oral language interpretation
- Translation of written materials

A written training plan must be developed to ensure the program office's LEP protocols and guidelines are a component of training for existing staff who have contact with clients, as well as part of the training protocol for new employees who will have contact with clients.

The Office of Administration must develop a written plan for monitoring program offices' compliance with the LEP policy. Such plan will include identification of responsible parties, periodicity and scope of monitoring efforts, and mechanisms for reporting problems or changes in need.

The Department's LEP Coordinator will be the individual responsible for monitoring each of the seven program offices to ensure the development, implementation and maintenance of the LEP policy and guidelines department-wide.

Complaints regarding meaningful access for persons with LEP may be filed with any of the following agencies:

Department of Public Welfare
Bureau of Equal Opportunity
Room 223 Health & Welfare Building
P.O. Box 2675
Harrisburg, Pennsylvania 17120
Telephone: (717) 787-1127
Fax: (717) 772-4366
TDD: (717)705-7772

U.S. Department of Agriculture
Office for Civil Rights
Room 326-W, Whitten Building
1400 Independence Avenue, SW
Washington, D.C. 20250-9410
Telephone: (202) 720-5964
(voice and TDD)

U.S. Department of Health & Human
Services
Office for Civil Rights
Suite 372, Public Ledger Building
150 S. Independence Mall West
Philadelphia, Pennsylvania 19106-
3499
Telephone: (800) 368-1019
Fax: (215) 861-4431
TDD: (215) 861-4440

PA Human Relations Commission
301 Chestnut Street, Suite 300
Harrisburg, Pennsylvania 17101
Telephone: (717) 787-4410
FAX: (717) 787-0420
TDD: (717) 787-4087



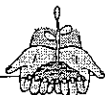
Department of Health & Human Services
Office for Civil Rights

Briefing for Pennsylvania Department of Public Welfare
Bureau of Equal Opportunity
Revised Policy Guidance on Providing Services to Persons Who Are Limited English Proficient
October 30, 2003

What Does the Revised Guidance Do?

- *Confirms commitment to Title VI Language Access*
- *Consistency and Uniformity*
- *Clarity in Application to HHS Context*

In Pennsylvania



Almost 1.1 million Pennsylvanians speak a language other than English
393,000 indicated they either do not speak English very well or not at all
Latino Population has increased 70% in the last 10 years
Asian Population has increased 65%

Title VI of the Civil Rights Act

No person in the United States shall on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.

- Section 601 of Title VI of the Civil Rights Act of 1964
42 U.S.C. Section 2000d et. seq.

HHS Title VI Regulation

Recipients may not utilize criteria or methods of administration which have the effect of subjecting individuals to discrimination because of their race, color or national origin...

- 45 C.F.R. Section 80.3 (b)(2) The HHS regulation implementing Title VI (Sec. 601 & 602).

The Supreme Court Decision

Title VI prohibits conduct that has a disproportionate effect on LEP persons because such conduct constitutes national-origin discrimination.

- Lau v Nichols, 1974

Revised HHS LEP Policy Guidance

Copies are available on OCR's website
www.hhs.gov/ocr

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Who Is Covered?



All recipients of HHS Federal financial assistance, either directly or indirectly, through a grant, contract or subcontract.

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Common Types Of Federal Financial Assistance



- Loans
- Grants
- Grants or loans of federal property
- Use of equipment & donations of surplus property

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In Addition to DPW Programs

- Public and private contractors, subcontractors and vendors
- Physicians and other providers who receive Federal financial assistance from HHS

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Who Is A Limited English Proficient (LEP) Person?

An LEP individual is a person who does not speak English as their primary language and who has a limited ability to read, write, speak or understand English.



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What Must Recipients Do?

- Under Title VI and its implementing regulations, recipients must take reasonable steps to ensure meaningful access to their programs, activities and services for LEP persons.

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Using the Four-Factor Analysis to Determine the Recipient's Obligation

1. *Number or Proportion of LEP Persons Eligible to be Served or Likely to be Affected by the Program or Service*
2. *Frequency of Contact*
3. *Nature and Importance of the Program, Activity, or Service*
4. *Costs and Resources Available*

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Factor 1: Number or Proportion of LEP Persons ...

- How many LEP persons are eligible to be served, or likely to be affected, by a recipient program or activity?
 - Potential sources of data may include:
 - encounter data
 - Data from Census, school systems, state and local government
 - community organizations

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Factor 1: Number or Proportion of LEP Persons ...

Also consider:

- Does the program serve minors whose parents/guardians are LEP?
- Are there populations who may be underserved because of language barriers?

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Factor 2: Frequency With Which LEP Individuals Come in Contact With Program, Activity or Service

- How often is a particular language encountered?

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Factor 3: Nature and Importance of the Program, Activity, or Service

- How important is the recipient's activity, information, service, or program?
- What are the possible consequences if effective communication is not achieved?
- Could denial or delay of access to services or information have serious life-threatening implications?

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Factor 4: Costs and Resources Available to the Recipient

- What are the reasonable costs of providing language assistance services?
- What resources are available?

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Applying the Four Factors

- Will be based on what is both necessary and reasonable in light of the four-factor analysis

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Applying the 4- Factors: Examples

- Significant number: Philadelphia: may need immediately available oral interpreters (Bi lingual staff).
- Moderate population: Erie, PA may want to have interpreters under contract or use a telephone service
- A rural county: Clinton: with few LEP customers: may want to use a telephone service

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Applying the 4- Factors: Examples

- A Medicaid Managed care dental practice which encounters one LEP Hmong patient per month on a walk-in basis may want to use a telephone interpreter service.
- If the individual is coming only for dental cleaning, it might be appropriate to refer to another practice.

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Two Types of Language Assistance

- Oral Interpretation: either in person or via telephone interpretation service
- Written translation: can range from translation of entire document to translation of a short description of a document

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Selecting Language Assistance Services

- There are two major considerations to be addressed in selecting services:
- Competency
 - Timeliness

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Interpreter Competency

- The recipient should take reasonable steps to assess that the interpreter is able to:
- Demonstrate proficiency in both English and in the other language
 - Demonstrate knowledge of specialized terms or concepts appropriate to the need
 - Demonstrate an understanding of the need for confidentiality and impartiality
 - Understand the role of interpreter without deviating to other roles

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Timeliness

- **When language assistance is needed and is reasonable, it should be provided in a timely manner—e.g., at a time and place that avoids the effective denial or delay of the service, benefit, or right at issue.**

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Selecting Language Assistance Services

Options for Oral Language Services:

- Bilingual Staff
- Staff Interpreters
- Contractors
- Telephone Lines & Video Teleconferencing
- Community Volunteers

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Family Members or Friends as Interpreters

- **Meaningful access**
- **Respect for LEP persons choices**

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Use of Family Members or Friends

- When Title VI requires that language services be provided, recipients should:
 - Inform the LEP Person that interpreter can be provided at no cost
 - Not require LEP persons to provide own interpreter
 - Not plan to rely on family members or friends as interpreters
 - Evaluate whether, because of special concerns, interpreter should be provided in any case

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Use of Family Members or Friends: Special Concerns

Providers should respect LEP Persons' desire to use an interpreter of their own choosing instead of free language assistance expressly offered by the recipient, subject to:

- Issues of competence, appropriateness, conflicts of interests, and confidentiality
- Heightened caution when a LEP person asks a minor child to serve as an interpreter

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Written Translations

Vital written materials should be translated.

- **Whether a document is “vital” depends upon the importance of the program, information, encounter, or service involved and consequences to the LEP person if the information is not provided accurately or in a timely manner.**

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Vital Written Materials Could Include, for instance...

- Consent and complaint forms
- Intake forms with the potential for important consequences
- Written notices of eligibility criteria, right, denial, loss or decrease in benefits or services, actions affecting parental custody or child support
- Notice advising LEP persons of free language assistance
- Written competency tests for license, job or skills where English is not required
- Applications to participate in a program or activity or to receive benefits or services

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Non-vital Documents Could Include, for instance...

- Hospital menus
- Third party documents, forms or pamphlets by a recipient as a public service
- For a non-governmental recipient, government documents and forms
- Large Document such as enrollment handbooks (though vital information contained in large documents may need to be translated)
- General Information about the program intended for informational purposes only

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Written Translations: Into What Languages Should Documents be Translated?

- Distinction should be made between languages that are frequently-encountered and less commonly-encountered languages

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Translation Options That May Be Considered

- Use certified translators
- Use of independent translator to "check" the translation for extremely critical documents
- Use independent translator to translate "back" into English
- Understand the expected reading level of the audience's vocabulary and phraseology
- Use community organizations to consider whether a document is written at a good level

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The Technical Assistance Piece

A suggested approach

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Designing Effective Language Assistance Plans - Five Steps

1. Identifying LEP individuals
2. Identifying methods of language assistance
3. Training staff
4. Providing notice of language services
5. Monitoring and updating LEP Plan

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Step 1

Identifying LEP Individuals

• Ways to identify LEP persons:

- Language identification cards
- Encounter data
- Posted notices

Resource:

- "I speak card," Department of Commerce, Bureau of the Census:
<http://www.usdoj.gov/crt/cor/Pubs/ISpeakCards.pdf>

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Step 2

Language Assistance Measures

May include information on:

- Types of language assistance available
- How staff can obtain those services
- How to respond to LEP callers
- How to respond to written communication from LEP persons
- How to respond to LEP individuals who have in-person contact
- How to ensure competency of language assistance

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Step 3

Training Staff

May include training to ensure that staff:

- Know about LEP policies and procedures
- Can work effectively with in-person and telephone interpreters



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Step 4

Providing Notice to LEP Persons

Examples include:

- Post signs in intake areas
 - <http://www.ssa.gov/multilanguage/langlist1.html>
- Announce language services in outreach materials
- Use a telephone voicemail menu
- Provide notices on non-English radio and T.V. stations
- Work with community-based organizations & stakeholders

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Step 5

Monitoring and Updating the LEP Plan

Consider assessing changes in:

- Frequency of encounters with LEP language groups
- Current eligible LEP populations
- Availability of resources
- Whether existing assistance is meeting the needs of LEP persons

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OCR Region III

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BULLETIN ROUTE SLIP

Program Office: Office of Mental Retardation
Bureau of Quality Improvement and Policy

Program Office Contact Name: Michelle Smeltzer

Bulletin Title: Limited English Proficiency (LEP) OMR/OMHSAS Joint Bulletin (Draft)

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ROUTE TO	DATE SENT	REQUESTED ACTION DATE	APPROVAL (SIGNATURE)	DATE APPROVED
Michelle Smeltzer Author of Bulletin	11/8		<i>Michelle Smeltzer</i>	
John R. Sloyer Bureau Director, Quality Improvement & Policy	11/8		<i>J. Sloyer</i>	
Mel Knowlton Division Chief, Quality Improvement & Policy	11/8		<i>Mel Knowlton</i>	
Ed Sadosky Director, MR Program Operations	11/9		<i>E. Sadosky</i>	
Joe Gualtier Bureau Director MR Program Support				
Emily Frola MR Bulletin Coordinator	11/16		<i>E. Frola</i>	

COMMENTS: - please correct and resubmit corrected. 11/15/04 MS
- ops found one error that I originally missed on 2nd page corrected 11/10/04 MS - there should be a cover letter for this one - please put it in return. - Thanks, E. Sadosky

Note under comments the brief reason and the date a bulletin packet is returned from a reviewing office for questions/corrections and the response date from the Program Office back to the reviewing office.

OCG - 10/03

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