

LANGUAGE ACCESS PLAN FOR LEP INDIVIDUALS

State Agency: Office of Alcoholism and Substance Abuse Services

Effective Date of Plan: October 5, 2012

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PART 1 – INTRODUCTION

Pursuant to Executive Order No. 26 (“Statewide Language Access Policy”), we have prepared this Language Access Plan (“Plan”) that sets forth the actions we will take to ensure that persons with limited English proficiency (“LEP”) have meaningful access to agency services, programs, and activities.

Statement of Agency Services to the Public:

OASAS's primary mission is to improve the life of New Yorkers by leading a premier system of addiction services through prevention, treatment and recovery; while working to make New York State alcohol safe and free from chemical dependence and compulsive gambling. In an effort to improve the lives of 2.5 million New Yorkers who are dealing with a drug, alcohol or gambling addiction, OASAS operates 12 Addiction Treatment Centers (ATCs) which provide in-patient rehabilitation services to over 10,000 persons each year. In addition, OASAS certifies, funds and oversees more than 1,500 local, community-based chemical dependence prevention, treatment and recovery programs which provide nearly 110,000 persons on any given day with a wide range of comprehensive services.

In developing this plan, we have understood LEP individuals to be persons who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English. We will reassess language needs periodically as needed, but at least every two years starting from the effective date of this plan.

PART 2 – ASSESSING LEP POPULATION LANGUAGE NEEDS

The estimated total number of individuals in our service area is: 219,043 (for Treatment provided at the 12 OASAS Addiction Treatment Centers) in 2010.

The top six languages spoken by LEP individuals that our agency serves or could potentially serve are as follows:

Language	Estimated Number of LEP Individuals Who Speak this Language
Spanish	1,216,200

Russian	136,373
Chinese	299,135
Italian	79,455
Korean	65,342
French (Haitian) Creole	52,292

We use the following resources to determine the top six languages spoken by LEP individuals:

- U.S. Census data (including American Community Survey data)
- Agency data on client contacts
- School system data
- Information from community organizations that serve LEP individuals

Names of organizations:

- Information from other government agencies

Names of agencies: NYS Office for Temporary and Disability Assistance

- Other (describe)

We have determined the frequency of our contacts with LEP individuals as follows:

During 2010, the number of LEP patients treated at our 12 Addiction Treatment Centers only was 11,519. Our Prevention Programs (centered almost exclusively on schools) and our Recovery Programs (administered by non-profit providers) do not capture/report data on LEP individuals they may serve. It is fair to state, however, that the majority of our Spanish-dominant and LEP individuals are served in the downstate area and specifically within New York City.

PART 3 – PUBLIC OUTREACH AND NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES

We inform LEP individuals, in the languages indicated in the chart in Part 2 of this plan, about their right to free language assistance services by using the following measures:

- LEP individuals are informed directly by our staff

In what ways? Currently, LEP individuals are informed by OASAS staff of the FREE language services available through the HOPELINE that offers the necessary translation/interpretive services. As this plan is implemented, we will be displaying generic

"I Speak... " posters at all of our facilities where we have direct contact with the public and LEP individuals.

Brochures or flyers about language assistance services

In public areas of the agency

Elsewhere in the agency's service areas

Signs posted about language assistance services

In public areas of the agency

Elsewhere in the agency's service areas

Outreach and presentations at schools, faith-based groups, and other community organizations

What are the LEP populations targeted? The LEP targeted population is dictated by the demographics of the area and/or of the respective organization to whom OASAS is presenting. To date, however, the primary populations we have targeted are Spanish and Chinese.

Local, non-English language media directed at LEP individuals in their languages

Telephonic voice menu providing information in non-English languages

In which languages: Spanish, Russian, Chinese and Korean and over 100 other languages offered through OASAS's HOPELINE service.

Other (describe)

PART 4 – PROVISION OF LANGUAGE ASSISTANCE SERVICES

We use the following resources to determine when an individual is LEP, and what the individual's primary language is, when the encounter is *in person*:

"I Speak" posters or visual aids

Reception staff make those determinations based on experience, with the assistance of bilingual staff members where available

Other (describe)

We use the following resources to determine when an individual is LEP, and what the individual's primary language is, when the encounter is *by telephone*:

- Reception staff make those determinations based on experience, with the assistance of bilingual staff members where available
- Telephonic interpreting service
- Other (describe) OASAS's telephonic interpretive services are provided through a contract with the NYC Department of Health and Mental Hygiene at no cost to user.

We record and maintain documentation of each LEP individual's language assistance needs as follows:

All LEP individual's language assistance needs are recorded at our ATCs, but ONLY if the patient is admitted to the Program.

A. Oral Interpreting Services

Our protocol(s) for assessing whether an LEP individual needs oral interpreting services is as follows:

For in-person encounters: Depending on the language need, a bilingual staff member may identify the specific language and either provide interpretive services or assist by contacting the HOPELINE to provide the necessary translation services. In addition we offer TTY service for our hearing-impaired clients. LEP individuals are advised that any/all interpretive services are offered free of charge.

By telephone: Assist the LEP individual by contacting the HOPELINE.

At initial contact in the field: Assist the LEP individual by contacting the HOPELINE. Aside from contacts made at an OASAS's administered Treatment Center, field contact with LEP individuals will be made primarily by an OASAS provider who is currently not subject to the Statewide Language Access Policy but who is aware of the HOPELINE service.

For pre-planned appointments with LEP individuals: OASAS has several Addiction Treatment Centers (ATC) with bilingual staff (Spanish) and two (2) ATCs have dedicated mono-lingual programs. For those LEP individual (clients) who have applied for and have been accepted into an OASAS ATC (and as such have pre-planned appointments) his/her language needs have already been identified and the respective Center will be prepared for their arrival and have the appropriate LEP services ready to be offered.

Other (describe):

Our protocol(s) for informing LEP individuals that they do not need to provide their own interpreters and that free interpreting services will be provided is as follows:

For in-person encounters: Currently all in-person needs for LEP individuals are addressed by offering assistance through our HOPELINE service or by a bilingual staff person. Clients are advised that they do not need to bring or hire their own interpreter.

By telephone: We offer our HOPELINE services and TTY services for the hearing impaired.

At initial contact in the field: An LEP individual will be advised of the free interpretive services of our HOPELINE. The client is further advised and that he/she need not hire nor bring a family member to serve as an interpreter in order to be served at any of OASAS's ATCs.

For pre-planned appointments with LEP individuals: OASAS has several ATCs with bilingual staff (Spanish) and 2 (two) ATCs have dedicated mono-lingual programs. For those LEP individuals (clients) who have applied for and have been accepted into an OASAS ATC, and as such have pre-planned their arrival, his/her language needs have already been identified and the respective treatment center will be prepared for their arrival, and the appropriate LEP services will be offered.

Other (describe):

If an LEP individual insists on using a family member, friend, or other person as an interpreter, our protocol(s) for determining whether to accept or decline such an arrangement is as follows:

LEP individuals that come into contact with our agency will be informed of the availability of free interpreting services. Generally, an LEP individual may not use a family member, friend, or a minor as an interpreter. However, during emergencies an LEP individual will be permitted to use a minor, a family member or friend as an interpreter. Upon request, an LEP individual may also be permitted to use a minor, a family member or friend as an interpreter for routine matters, such as asking the location of the office, hours of operation or rescheduling an appointment. Where the interaction with the LEP individual occurs at the agency's office, and an individual is permitted to use an interpreter of his or her choosing, he or she must fill out a written consent/waiver form.

Where an LEP individual is engaged in official business with the agency, the agency will provide an independent interpreter at all times. An LEP individual will not be permitted to use an independent interpreter of his or her choosing when filling out applications or when involved in other legal matters.

Our protocol(s) for obtaining interpreter services in a timely manner is as follows:

If, through our pre-planned appointment process, OASAS is made aware of the respective LEP needs of an incoming individual, interpretive service arrangements will be ready at time of intake. It is this

model that OASAS uses for its two (2) dedicated mono-lingual programs (where the dominant LEP language is Spanish).

We record and maintain documentation of oral interpreting services provided to LEP individuals at each encounter as follows:

OASAS records and maintains documentation of oral interpretation services through its contract arrangements with the vendor and through its billing mechanism.

Competency and confidentiality

The linguistic and cultural competence of interpreters is addressed as follows:

Currently, through on-going cultural competency and sensitivity training, OASAS provides basic/essential interpretive services through its bilingual staff, where available, as well as through our HOPELINE service. As this new plan is implemented, OASAS will work closely with the Administration to obtain "certified interpreter" status for staff who have identified a proficiency in a second language so they may be used as "official" interpreters in the delivery of OASAS administered services. This certification process is still being explored and, if approved, will be implemented accordingly so that we may further assist our clients in providing accurate and effective language assistance to LEP individuals.

The issue of confidentiality pertaining to the use of interpreters is addressed as follows:

As an established employment practice/condition, OASAS employees are under a strict obligation to adhere to the confidentiality of all those they serve. Under a Qualified Service Organization Agreement (QSOA) a contract with any person/agency providing services to OASAS (in this case interpretive services) is bound by law to abide by strict confidentiality rules in relation to information about any LEP individual receiving services from OASAS.

Maintaining a list of oral interpreting resources

We use, or have available for oral interpreting, the following resources:

- Bilingual staff members who work directly with LEP individuals

Number of staff and languages spoken: Bilingual OASAS staff work directly with LEP individuals and are part of the dedicated mono-lingual programs and our hearing-impaired program.

- Bilingual staff members who provide oral interpreting when necessary

Number of staff and languages spoken: Dedicated OASAS staff who work at our monolingual dedicated facilities speak primarily Spanish.

- Telephonic interpreting service

Names of vendors: Our HOPELINE interpreting service is contracted with NYC Department of Health and Mental Hygiene.

- Contracts or other arrangements with community organizations or individuals for oral interpreting services

Names of individuals/organizations and languages:

- Other (describe)

The agency's Language Access Coordinator maintains the list of oral interpreting resources that are available to staff, which includes:

- Names and contact information for all resources
- Names and locations of staff members who are available to act as interpreters or provide services directly in the LEP individual's primary language
- Languages in which each interpreter or service is qualified
- Procedure for accessing each interpreter or service

We inform all staff members who have contact with the public how to obtain oral interpreting services as follows:

This information is shared through our on-going institutional training; pay stub announcements; OASAS newsletter and ATC Director's meeting. As this plan is implemented and improvements are made to our homepage and website, this information will be made available through our Intranet page through a shared drive.

B. Translations of Written Documents

The process to determine and reassess, at least every two years starting from the effective date of this plan, those vital documents (including website content) which must be translated is as follows:

The LAC and other managerial staff will review and assess changes to existing documents and any new publications to determine if said documents are vital and must therefore be translated. The agency through the LAC will also assess the on-going delivery of OASAS services to the public that may require development of a new vital document to be offered in the six languages identified in Part

2 and/or a specific language that has been identified as a common language now used by an increased number of clients we serve.

The process to timely translate documents that LEP individuals submit in their primary languages is as follows:

Any documents submitted by an LEP individual that cannot be accurately translated by a bilingual OASAS staff will be submitted to a designated vendor (as identified by OGS) for translation of same.

The process for ensuring that documents are written in plain language before they are translated into other languages is as follows:

Currently all OASAS documents that have been translated into Spanish are in plain language in accordance with the Federal Lexicon. As this plan is implemented, OASAS will continue to use the Federal Lexicon as well as the list of most commonly used terms compiled by the Office of the Deputy Secretary for Civil Rights.

The following documents are currently translated by the agency in the languages indicated:

The following vital documents are currently available at OASAS in English and Spanish and will be translated into the other languages identified in Part 2 above:

- TRS-1 Prohibition on Redisclosure of Information Concerning Alcoholism & Substance Abuse Patient;
- TRS-2 Consent for Release of Information Concerning Alcoholism & Substance Abuse Patient;
- TRS-2.2 Withdrawal of Consent for Release of Information
- TRS-2.3 MATS Consent for Release of Information
- TRS-3 Consent for Release of Information Concerning Alcoholism/Substance Abuse Patient's Presence in Facility & General Medical Condition;
- TRS-4 Criminal Justice Consent to Release Information;
- TRS-5 Authorization for Release of Confidential HIV-Related Information;
- TRS-6 Notice of Status and rights - Informal Admission;
- TRS-7 Consent to Disclose Communicable Diseases;
- TRS-8 Notice to Patients;
- TRS-9 Consent for Inpatient Rehabilitation Treatment for a Person Under Age of 18;
- TRS-28 Request to Obtain a Copy of the Clinical Record;

- TRS-32 Request to Amend the Record of Alcoholism/Drug Abuse Patient;
- TRS-33 Privacy Complaint Form;
- TRS-33.1 Privacy Complaint Resolution Form;
- TRS-35 Request to Restrict the Use of Confidential Information;
- TRS-36 Request to Review the Denial of a Documentation Request;
- TRS-49 Consent to Release of Information for Criminal Justice Clients;
- TRS-51 Authorization for Release and Exchange of Health and Behavioral Health Information

The process for ensuring that translations are accurate and incorporate commonly used words is as follows: (Note: The Office of the Deputy Secretary for Civil Rights will maintain a list of commonly used words.)

OASAS, through its vendor (where applicable), will ensure that proofing/editing for correctness and cultural sensitivity is a component of the translation services provided by any vendor under contract as part of the publication process. OASAS will also ensure that plain language is used in materials produced before translation to ensure information is accessible to a range of literacy levels.

We use, or have available for translating, the following resources:

- Contracts with language service vendors

Names of vendors: Currently we are providing services through a Memorandum of Understanding with the NYS Office of Temporary and Disability Assistance.

- Contracts or other arrangements with community organizations or individuals for oral interpreting services

Names of individuals/organizations and languages:

- Oral translations of written documents by bilingual staff members
- Oral translations of written documents by other individuals or community organizations
- Other (describe)

The agency's Language Access Coordinator maintains the list of written translation resources that are available to staff, which includes:

- Names and contact information for all resources
- Names and locations of staff members who are available to provide oral translations of written documents
- Languages in which each translation service is qualified
- Procedure for accessing each translation service

PART 5 – STAFF TRAINING

The person(s) in the agency who is responsible for the provision of training to staff in language access issues is: Director of Human Resources; Affirmative Action Officer; Legal Counsel.

The staff training includes the following components:

- The legal obligations to provide meaningful access to benefits and services to LEP individuals
- How to access language assistance services
- How to work with interpreters
- Cultural competence and cultural sensitivity
- Documenting the language needs of LEP individuals and the language services provided to them by the agency
- How to obtain written translation services

The methods and frequency of training are as follows:

The methods of training will ensure that each aspect of the training components identified in Part 5 are presented and explained to all agency personnel involved in direct contact with LEP individuals. Staff training will include: how to correctly identify situations of LEP contact and the utilization of the appropriate language access service, obtaining an interpreter or having the LEP individual identify the proper language of the translated document. Said training will be conducted with selective frequency, but no less than semi-annually, and for new hires the Statewide Language Access Policy will be reviewed and explained at the time of hire. Statewide Language Access Policy

will be included in every new hire packet for their on-going review and reference. A semi-annual review will be conducted of all vital documents used at ATC to ensure that they are current and in compliance with agency policy and Statewide Language Access Policy. This review will be conducted by the Associate Commissioner for Treatment in conjunction with the LAC.

PART 6 – ADMINISTRATION

Monitoring

To ensure compliance with the Plan, the LAC will monitor its implementation as follows:

Upon implementation of the Plan, the LAC will: a) conduct Quarterly reviews of the Plan to ensure that all translation/interpretive services are being provided to LEP individuals as and when needed; b) meet with OASAS staff responsible for the execution of specific areas of responsibility within the Plan, e.g. training, updating of website and weblinks for LEP individuals to access information about the Agency and its services; c) modify/update changes to the Plan as they become necessary; d) meet on a quarterly basis with the OASAS LAC Working Group.

Complaints

We provide information to the public, including to LEP individuals in languages regularly encountered in this service area, advising them of the right to file a complaint if they feel that they have been the subject of discrimination. The information we provide describes how and/or where to file a complaint. We do not retaliate or take other adverse action because an individual has filed a complaint alleging discrimination based on LEP status or needs.

We display information on the right to file a complaint, and the procedures to file a complaint, in the following manner:

Notice of access to our Patient Advocacy unit is made known and available to all OASAS administered facilities and provider programs. Notices informing LEP individuals of the availability of a complaint form will be displayed in public areas throughout our agency. The standard complaint form will be made available in the 6 languages mentioned in Part 2 of this plan.

We handle complaints made to the agency regarding the provision of language assistance services in the following manner:

All patient complaints are handled through the OASAS Patient Advocacy unit. Furthermore, OASAS will use the Statewide Language Access Complaint Form to address language access complaints.

PART 7 - SIGNATURES

Arlene Sanchez - Commissioner 9/10/12
Head of Agency Title Date

Laman M. Rodriguez - Special Assistant/KP 9/10/12
Agency LAC Title Date

[Signature] 9/17/12
Deputy Secretary for Civil Rights Date