LANGUAGE ACCESS PLAN FOR LEP INDIVIDUALS

State Agency: Department of Health

Effective Date of Plan: October 5, 2012

Language Access Coordinator (LAC): Richard C. Snyder

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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:

The NYS Department of Health (Department) protects and promotes the health of the people of New York by preventing epidemics and the spread of disease, promoting healthy lifestyles for children and families, protecting against hazards in homes, work, communities and the environment, assuring access to high quality health care, and preparing for and responding to emergencies. As part of the Department's mission to promote healthy lifestyles and protecting the public health of the people of this State, the Department seeks to ensure that all individuals, including those with limited ability to read, speak, write or understand English, are able to access our Department's services, programs and activities.

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: All NYS Residents

The top eight languages spoken by LEP individuals that the Department serves or could potentially serve are as follows:

Language	Estimated Number of LEP Individuals Who Speak this Language
Spanish or Spanish Creole	1,238,710
Chinese	330,318
Russian	131,471
French Creole	69,522
Italian	67,424
Korean	62,143

Polish	46,317
Arabic	36,531

We use the following resources to determine the top eight 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: AIDS Community Organizations/Providers

☑ Information from other government agencies

Names of agencies: NYS Agencies including Corrections, Mental Health, Children and Family Services, Office Temporary Disability and Assistance, Department of Motor Vehicles; County Social Service agencies; and school districts statewide.

☑ Other (describe) Migration Policy Institute (mpi) (www.migrationinformation.org)

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

Upon initial contact with any of the Department program areas providing direct public services, language needs are determined and documented by program staff. Additional data is gathered through contact with social workers that may be assisting the LEP individual, advocacy groups, Department contractors, and local municipal staff. Frequency of contact is based on the LEP individual's level of need and may occur in various settings or circumstances. Some examples of contacts with LEP individuals include but are not limited to the following: (1) contacts occurring when the LEP individual applies to obtain services or benefits under programs administered by the Department, including but not limited to services that are provided through the Department's Veteran's homes; (2) contact with LEP individuals through the AIDS Institute HIV/STD partner services notification activities wherein Department staff contact known partners of persons infected with HIV or AIDS, or conduct HIV/STD testing in the field; (3) contact with LEP individuals when such individuals seek information or documentation maintained by the Department, including birth, death or marriage certificates; and (4) in the course of the Department's monitoring and oversight role, including when conducting home/health care facility visits, surveillance, and inspections, such as inspections of summer camps and restaurants.

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? At any public contact (In person or by phone), if an individual indicates a need for language assistance staff inform them of the services that are available.

☑ 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? In addition to the languages indicated in the chart in Part 2 of this plan, outreach may be conducted to LEP populations based on community need.

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

☐ Telephonic voice menu providing information in non-English languages

In which languages:

☐ 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

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) Referral from outside source

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

Language assistance needs are documented in individual files that may be maintained by the various programs within the Department that provide direct public services. In addition, the Language Access Plan (LAP)Work Group, formed by the Department to implement the provisions of this plan, will develop a template language access needs form for use by programs within the Department providing direct public services. The form will be used to collect and maintain information on the language assistance needs of LEP individuals within such programs. Programs will be required to provide this information to the Department's Language Access Coordinator. The information derived from the forms will assist the LAP Work Group in evaluating the effectiveness of the plan.

A. Oral Interpreting Services

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

For in-person encounters: Bilingual staff currently address language assistance needs on an individual basis during the encounter. "I Speak" translation posters have been distributed to staff. In addition, staff will be trained to meet LAP requirements.

By telephone: Telephone contacts to programs from LEP individuals are handled by bilingual staff within the program. A roster of bilingual staff within the Department who have volunteered to assist with calls is maintained by the LAC. In addition, telephonic interpreting services are available.

At initial contact in the field: Bilingual staff will be utilized in the field dependent on community need, when available. In addition, "I Speak" cards will be utilized by field staff.

For pre-planned appointments with LEP individuals: Information concerning oral interpreter needs is gathered as appointments are made. The need for an oral interpreter may be determined by reception staff with the assistance of bilingual staff members, self- identification by the LEP individual, or through referral from outside sources.

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: Bilingual staff, if available in the language of the LEP individual, will inform the LEP individual that he or she does not need to provide his or her own interpreter and that free interpreting services will be provided. Staff will also utilize the "I Speak" card to assist in identifying the language of an LEP individual. Written notice, translated in the languages indicated in the chart in Part 2 of this plan will be provided to advise LEP individuals that free language assistance is available.

By telephone: Staff will inform the LEP individual that he or she does not need to provide his or her own interpreter and that free interpreting services will be provided. Staff will also utilize the Department's telephonic interpreting service to notify LEP individuals.

At initial contact in the field: Bilingual staff, if available in the field who are fluent in the language of the LEP individual, will inform the LEP individual that he or she does not need to provide his or her own interpreter and that free interpreting services will be provided. Staff in the field will also utilize the "I Speak" card to assist in identifying the language of an LEP individual. Written notice, translated in the languages indicated in the chart in Part 2 of this plan will be provided to advise LEP individuals that free language assistance is available.

For pre-planned appointments with LEP individuals: Information concerning oral interpreter needs is gathered as appointments are made. Reception staff with the assistance of bilingual staff members will notify an LEP individual that free interpreting services are available.

Other (describe): Written notice, translated in the languages indicated in the chart in Part 2 of this plan, will be provided to advise LEP individuals that free language assistance is available.

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:

When it is determined that an interpreter is needed, programs arrange interpreter services for scheduled appointments; bilingual staff are identified that may assist the LEP individual; or telephonic interpreter services are utilized as needed.

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

Oral interpreting services are documented in individual files that may be maintained by the various Department programs that provide direct public services. In addition, programs will document such services on the language access needs form. The Department anticipates that interpretation services obtained through a statewide contract will include detailed reporting requirements on services provided to LEP individuals under the contract.

Competency and confidentiality

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

Language parenthetic staff are tested through Civil Service for spoken-language proficiency. Department staff volunteers self-identify their ability to read, write and speak a language other than English. Where an agency utilizes independent interpreting services, that vendor will implement quality assurance standards to guarantee that its interpreters are trained and are linguistically and culturally competent.

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

All Department staff in programs identified as covered programs under HIPAA are trained in HIPAA and confidentiality compliance. Interpreters under contract with the State must comply with confidentiality requirements, including applicable HIPAA requirements. The training provided to staff will address the importance of confidentiality. Furthermore, independent interpreters will enforce standards of confidentiality in accordance with NYS Law.

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 staff members who provide oral interpreting when necessary

  Number of staff and languages spoken: Approximately 140 staff collectively speak

fifteen languages, including the languages listed in the chart in Part 2 of this plan and Arabic, Creole, Greek, Hindi, Romanian, Polish, Portuguese, Ukrainian and Vietnamese.

☑ Telephonic interpreting service

Names of vendors: Language Services Associates, Inc.

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

Names of individuals/organizations and languages:

☑ Other (describe) The Department contracts with interpreter services that collectively offer interpretation for twenty six languages. Entities under contract with the Department are: Multicultural Association of Medical Interpreters (MAMI); Geneva Worldwide, Inc; Language Services Associates, Inc.

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:

Mandatory training will be required for all staff who have contact with the public in programs identified as providing direct public services. The training will provide staff with directions for contacting language service providers.

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:

Documents that the Department determines to be vital include intake and consent forms; notice of rights, requirements and responsibilities; and such others that contain pertinent information to assist

in accessing program benefits. Programs within the Department will determine which documents are considered to be a vital document in need of translation. The LAP Work Group will review all forms and documents program has identified as being a vital record prior to translation. All translated documents will be reviewed and monitored as part of our language access plan.

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

Upon receiving a document from an LEP individual in their primary language, staff will review the document and submit said document for translation in a timely manner.

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

LAP Work Group liaisons in all Department programs will review documents for plain language compliance prior to translation.

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

Publication	Title	Current Languages
9211	ADAP Plus: Medical care for people with HIV	English
9371		Spanish
9372		French
1040	ADAP Plus	English
1041		Spanish
1051		French
0240	HIV Counseling, Call for Facts	English
0241		Spanish
9216	Important News for Pregnant Women	English
9217		Spanish
9192	New York State Confidentiality Law & HIV	English
9193		Spanish
9300	PNAP: We can work together to stop the spread of HIV	English
9301		Spanish
9302		French
9303		Chinese
9304		Vietnamese
9305		Russian
9306		Polish
9308		Laotian
9331		Khmer
9236	Staying on Schedule: Tips for Taking Your HIV Medicines	English
9237		Spanish
0521	Child Health Plus	English
0522		Spanish
0558		English
0559		Spanish
0592		English/Spanish
0595		Creole
0596		Korean
0597		Farsi
0571		English
0569	Growing Up Healthy	English/Spanish
5114		Korean
5115		Chinese
5116		Haitian
5117		Russian

Publication	Title	Current Languages
0575	Child/Teen Health Program	English/Spanish
4804	Early Intervention Program A Parent's Guide (58-page Booklet)	Arabic
4848		Bengali
4805		Chinese
0532		English
4801		French
4806		Greek
4802		Haitian
4807		Hmong
4803		Italian
4808		Japanese
4809		Khmer
4810		Korean
4811		Laotian
4847		Punjabi
4812		Russian
0533		Spanish
4813		Vietnamese
4814		Yiddish
0498	Newborn Screening	Chinese
0499		French
0548	Resource Directory for Children with Special Health Care Needs	English
0549		Spanish
4816		Chinese
4817		Russian
5100	Family Health Plus	English
5003		Spanish
5004		Creole
5019		Chinese
5020		Russian
1102	Medicaid Family Planning Services	English
1121		Spanish
1103		English
1104		Spanish

Publication	Title	Current Languages
1112	Medicaid Family Planning Services	Russian
1113		Chinese
1114		Creole
1115		Korean
1116		Arabic
1117		Hindi
4081	Find Out More About WIC	English
4082		Spanish
4083		French
4254		Haitian/Creole
4255		Vietnamese
4256		Hindi
4257		Arabic
4258		Chinese
4259		Russian
1427	Handling Concerns About Care & Services in Nursing Homes	English
1440		Spanish
3343	Managed Care Bill of Rights	English
1430	NYS Proxy Law: Appointing Your Health Care Proxy	English
1431		Spanish
1449	Your Rights as a Hospital Patient In New York State (available on DOH website only)	English
1450		Spanish
1437	Your Rights as a Nursing Home Resident in New York State	English
1438		Spanish
1822		Spanish
1823		French
1834		Arabic
1835		Creole/Haitian
2425	NYS Immunization Information System	English
2426		Spanish
2370	New York State Requirements for School Entrance/ Attendance	English
2405		Spanish

Publication	Title	Current Languages
3301	How to Choose a Medicaid Managed Care Health Insurance Plan	English/Spanish
3304		Russian
3305		Hebrew
3306		Polish
3307		Albanian
3308		Italian
3309		Arabic
3310		Chinese
3311		Vietnamese
3312		Laotian
3313		Hindi
3314		Urdu
3350	Medicaid Managed Care: Consumers Guide (New York City)	English
3351		Spanish
3370		Chinese
3371		Russian
9213		French
2853	Donate Life: Pass It On!	English
2854		Spanish
2851		Korean
2861		French
2860		Russian
2862		Chinese
2866		Vietnamese
2855		English
2856		Spanish
2864		French
2863		Russian
2865		Chinese
2867		Vietnamese
2852		Korean

Publication	Title	Current Languages
9216	Important News for Pregnant Women (prenatal HIV testing)	English
9217		Spanish
9218		French
9219		Chinese
9220		Vietnamese
9221		Russian
9257	**Important News for Pregnant Women and New Mothers (newborn HIV testing)**	**English**
9258		**Spanish**
9259		**French**
9260		**Chinese**
9261		**Vietnamese**
9262		**Russian**
9346		**Creole**
6000	Prenatal Care Assistance Program (PCAP)	English
6001		Spanish
6002		Korean
6003		Haitian-Creole
6004		Chinese
6005		Hindi
6006		Arabic
6007		Russian

Documents identified as vital will be translated into all of the top 8 languages identified in part 2.

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.)

The Department currently utilizes a second contractor to review the translated document to ensure accuracy of terminology and content.

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

- [x] Contracts with language service vendors

  Names of vendors: Multicultural Association of Medical Interpreters (MAMI); Geneva Worldwide, Inc; Language Services Associates, Inc

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

  Names of individuals/organizations and languages:

- [x] Oral translations of written documents by bilingual staff members

- [x] 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:

- [x] Names and contact information for all resources

- [x] Names and locations of staff members who are available to provide oral translations of written documents

- [x] Languages in which each translation service is qualified

- [x] 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: Brian Caldwell (bhc01@health.state.ny.us

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 Language Access Coordinator will work with relevant programs identified as providing direct public services to designate program liaisons and establish and maintain a list of staff who have contact with the public within these programs.

- Staff lists will be updated quarterly;
- Employees identified will complete an initial training and employees assigned to new functions that bring them into contact with the public must complete the CBT training within 90 days of assignment to the program;
- As changes occur in the program, the CBT will be updated, designated program liaisons will be informed of changes to communicate to relevant staff and updates will be posted on DOH's News Site.

PART 6 – ADMINISTRATION

Monitoring

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

The LAP Work Group meets to review progress, identify gaps and develop work plans to resolve any gaps. Frequency of the LAP Work Group meetings are determined by priorities set. The plan will be monitored by the LAP Work Group and updated as needed.

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:

The Department will require that all programs identified by the Department as providing direct public services place notifications in reception areas indicating the availability of a complaint form in the languages indicated in part 2. The Department will utilize the Statewide Language Access Plan Complaint Form that will provide information on the right to file a complaint and procedures to do so. The complaint form will be available in the languages described in part 2.

Additionally, the Department requires that hospitals in this State adopt and make available a "Patient Bill Rights", available in English, Spanish, Italian, Russian, Greek, Yiddish, Creole, and Chinese. The following are inserts from the Patient's Bill of Rights:

> ***As a patient in a hospital in New York State, you have the right, consistent with law, to:***
>
> *Understand and use these rights. If for any reason you do not understand or you need help, the hospital MUST provide assistance, including an interpreter.*
>
> *Receive treatment without discrimination as to race, color, religion, sex, national origin, disability, sexual orientation, source of payment, or age.*
>
> *Complain without fear of reprisals about the care and services you are receiving and to have the hospital respond to you and if you request it, a written response. If you are not satisfied with the hospital's response, you can complain to the New York State Health Department. The hospital must provide you with the State Health Department telephone number.*

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

Program staff will respond to complaints it receives regarding the provision of language assistance services. The Language Access Coordinator will address complaints received that cannot be resolved by program staff.

PART 7 – SIGNATURES

Nirav R. Shah, M.D., M.P.H.

Nirav R. Shah Head of Agency	Commissioner of Health Title	09/05/12 Date
Richard C. Snyder Agency LAC	Associate Personnel Administrator Title	09/05/12 Date
AW Deputy Secretary for Civil Rights		9/17/12 Date