

**Putting All the Pieces Together:  
Identifying Languages Spoken  
and Promising Practices for  
Overcoming Language Barriers**

2007 Federal Interagency Conference  
on Limited English Proficiency

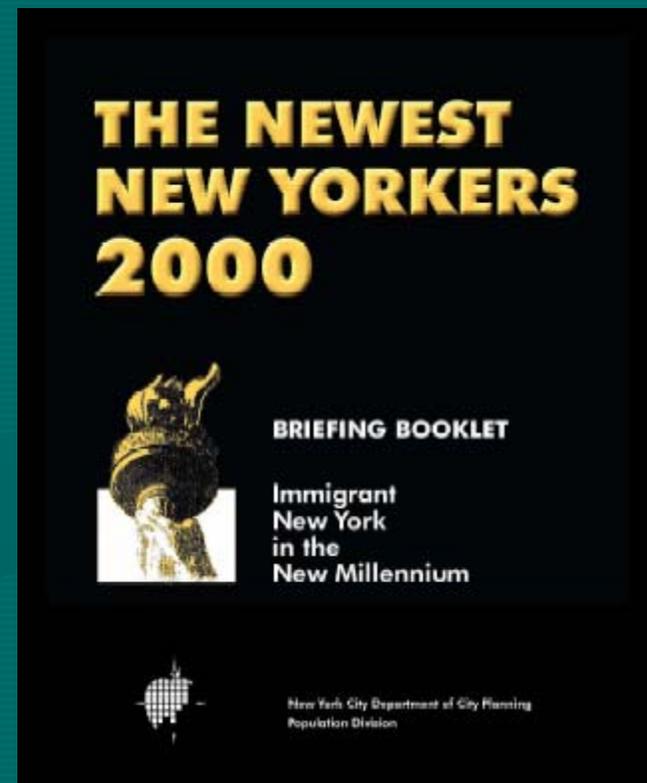
March 15-16, 2007

# Presenters

- Walter (Curt) Norris, Director of Employment Diversity, Las Vegas Metropolitan Police Department
- Susan Shah, Senior Planner, Center on Immigration and Justice, Vera Institute of Justice
- David M. Smiddy, ESOL/Volunteer Coordinator, Clark County Literacy Coalition
- Mara Youdelman Director, Language Access Advocacy Project, National Health Law Program

# Conducting a Self Assessment: Understanding Demography

- Analyses of census and ACS data
  - State and city departments of planning
  - Modern Language Association ([www.mla.org](http://www.mla.org))
  - Migration Policy Institute ([www.migrationinformation.org](http://www.migrationinformation.org))



# Conducting a Self Assessment: Understanding Demography

- Federal, state, and city departments of education
  - School accountability reports
- Federal, state, and city departments of health
  - Vital statistics data
- Municipal and state courts
  - Use of interpreters

# Conducting a Self Assessment: Understanding Demography

- Data from community (pros and cons)
- Private research and marketing companies

# Conducting a Self Assessment: Measuring Nature and Frequency of Contact

- Promising Practices Reports by NHeLP from The Commonwealth Fund
  - RPT. 1 - Small Providers (released 4/05) – examined how small providers (<10 clinicians) offered language services:
    - Solo Practitioners and Small Group Practices
    - Community Clinics and Health Centers
    - Family Planning Clinics
    - Assistance to Small Providers from Other Systems/Institutions

# Conducting a Self Assessment: Measuring Nature and Frequency of Contact

- RPT. 2 - State/Local Benefit Offices (forthcoming): examined how state/local health-related benefit offices offered language services:
  - State central agency offices
  - Local agency offices

# Conducting a Self Assessment: Measuring Nature and Frequency of Contact

- Important to identify individuals being served and eligible to be served
  - Measuring those being served can help to ensure needed language services are available as well as planning future needs
- Determining language needs at first points of contact – notations in schedule/patient records; language notification flyers

# Conducting a Self Assessment: Identifying Language Needs

- Identification of language needs
  - “I Speak” cards/posters – patients can point to their language and office staff can note
- Recording language needs
  - L.A. Care Health Plan – color-coded stickers designate language needs
  - Women’s Health and Education Center – notes language needs in schedule and computer data system

# Conducting a Self Assessment: Identifying Language Needs

- WA Department of Social and Health Services  
– requires noting the client's primary language in its computer system
- KY Cabinet for Health and Family Services collects language information and specifics on each encounter using language services

# Arizona

- Department of Economic Security – database does not proceed past certain fields without noting the client’s language needs
  - clients are asked their primary language at initial and renewal interviews
  - includes 68 language choices plus an open-ended option

FA-001-L (3-03) ARIZONA DEPARTMENT OF ECONOMIC SECURITY  
Family Assistance Administration  
**LANGUAGE NEEDS**

| CASE NAME (Last, First, M.I.) | CASE NO. | DATE |
|-------------------------------|----------|------|
|-------------------------------|----------|------|

**I. YOUR RIGHT TO SERVICES IN YOUR LANGUAGE**  
You have a right to a free interpreter when you apply for or receive Cash Assistance, Food Stamps or AHCCCS Medical Assistance. You also have the right to ask DES to send forms and letters to you in your language. These services must be provided to you within a reasonable time frame.

**II. WHAT LANGUAGE DO YOU SPEAK? (Please check only one box.)**

I speak English and do not need special language services.  
 I speak the language checked below:

|  |   |                                     |   |
|--|---|-------------------------------------|---|
| <input type="checkbox"/> Albanian          | <input type="checkbox"/> Greek                  | <input type="checkbox"/> Marathi    | <input type="checkbox"/> Spanish        |
| <input type="checkbox"/> Amharic           | <input type="checkbox"/> Gujarati               | <input type="checkbox"/> Marathi    | <input type="checkbox"/> Sudanese       |
| <input type="checkbox"/> Apache            | <input type="checkbox"/> Havasupai              | <input type="checkbox"/> Maricopa   | <input type="checkbox"/> Tagalog        |
| <input type="checkbox"/> Arabic            | <input type="checkbox"/> Hindi – Indian (India) | <input type="checkbox"/> Mien       | <input type="checkbox"/> Tamil          |
| <input type="checkbox"/> Bengali           | <input type="checkbox"/> Hmong                  | <input type="checkbox"/> Mohave     | <input type="checkbox"/> Teguho         |
| <input type="checkbox"/> Bosnian           | <input type="checkbox"/> Hopi                   | <input type="checkbox"/> Mon-Khmer  | <input type="checkbox"/> Tewa           |
| <input type="checkbox"/> Cambodian         | <input type="checkbox"/> Hualapai               | <input type="checkbox"/> Navajo     | <input type="checkbox"/> Thai           |
| <input type="checkbox"/> Chinese/Cantonese | <input type="checkbox"/> Hungarian              | <input type="checkbox"/> Paiute     | <input type="checkbox"/> Tohono O’Odham |
| <input type="checkbox"/> Chinese/Mandarin  | <input type="checkbox"/> Indonesian             | <input type="checkbox"/> Pima       | <input type="checkbox"/> Turkish        |
| <input type="checkbox"/> Cocopah           | <input type="checkbox"/> Italian                | <input type="checkbox"/> Polish     | <input type="checkbox"/> Urdu           |
| <input type="checkbox"/> Croatian          | <input type="checkbox"/> Japanese               | <input type="checkbox"/> Portuguese | <input type="checkbox"/> Ute            |
| <input type="checkbox"/> Dinka             | <input type="checkbox"/> Kannada                | <input type="checkbox"/> Punjabi    | <input type="checkbox"/> Vietnamese     |
| <input type="checkbox"/> Farsi             | <input type="checkbox"/> Kashmiri               | <input type="checkbox"/> Quechen    | <input type="checkbox"/> Yaqui          |
| <input type="checkbox"/> Filipino          | <input type="checkbox"/> Khmer                  | <input type="checkbox"/> Romanian   | <input type="checkbox"/> Yavapai        |
| <input type="checkbox"/> French            | <input type="checkbox"/> Korean                 | <input type="checkbox"/> Russian    | <input type="checkbox"/> Yiddish        |
| <input type="checkbox"/> French Creole     | <input type="checkbox"/> Laotian                | <input type="checkbox"/> Serbian    | <input type="checkbox"/> Yoruba         |
| <input type="checkbox"/> German            | <input type="checkbox"/> Lithuanian             | <input type="checkbox"/> Somali     | <input type="checkbox"/> Zuni           |

Other (Specify) \_\_\_\_\_

**III. HOW WOULD YOU LIKE FOR US TO COMMUNICATE WITH YOU? (Please check only one box.)**

I want DES to send me forms and letters in English.  
 I want DES to send me forms and letters to me in the language checked above. If DES cannot do this, I want DES to orally translate the forms and letters to me.  
 I need all forms and letters orally translated to me because I do not read well enough to understand them.

**CERTIFICATION OF LANGUAGE**

The person identified above could not complete this form on his/her own. I determined this person’s language by the following method:

Bilingual staff \_\_\_\_\_  
(Name/Worker PCN)

Interpretation line \_\_\_\_\_  
(Service Used)

Other \_\_\_\_\_  
(Type of Method)

| DES WORKER’S NAME (Please Print or Type) | DES WORKER’S NAME SIGNATURE | WORKER’S PCN | DATE |
|--|-----------------------------|--------------|------|
|--|-----------------------------|--------------|------|

Equal Opportunity Employer/Program • Under the Americans with Disabilities Act (ADA), the Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service, or activity. For example, this means that if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. This document is available in alternative formats by contacting your local office manager.

# Los Angeles County

- Department of Public Social Services collects language information at initial eligibility and renewals
- County compiles a report to show the number of LEP individuals in the Medicaid caseload, by language spoken, served by each eligibility office during the month

COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC SOCIAL SERVICES

**LANGUAGE DESIGNATION FORM**

CASE NAME: \_\_\_\_\_ CASE NUMBER: \_\_\_\_\_

**FREE INTERPRETER SERVICES ARE AVAILABLE**  
(please ask your worker)

**A. SPOKEN LANGUAGE DESIGNATION**  
I speak the language checked below. I prefer to speak/talk about my case or related matters with staff from the Department of Public Social Services in the language selected below. This designation takes the place of any choices made before.

Armenian     Cambodian     Cantonese     English  
 Korean     Mandarin     Russian     Spanish  
 Tagalog     Vietnamese     Other (Specify) \_\_\_\_\_

**B. WRITTEN LANGUAGE DESIGNATION**  
 I prefer to get written letters, notices, forms and other communication in English.

OR

I prefer that written communications and forms be sent or given to me, if available, in the language specified below (Chinese is the written language for those who speak Cantonese and Mandarin). In addition, I understand that if written communications from the Department of Public Social Services are not available in the language specified below, I can receive a verbal translation by contacting my case worker.

Armenian     Cambodian     Chinese  
 English     Korean     Russian     Spanish  
 Tagalog     Vietnamese     Other (Specify) \_\_\_\_\_

\_\_\_\_\_  
APPLICANT'S/PARTICIPANT'S SIGNATURE (OR MARK) DATE

I hereby verify that the applicant's/participant's above choices are reflected on LEADER and/or GEARS and/or CMIPS and/or any other computer program used to manage eligibility issues.

\_\_\_\_\_  
CASE CARRYING WORKER'S SIGNATURE FILE NUMBER DATE

\_\_\_\_\_  
SUPERVISOR'S INITIALS DATE

PA 481 Eng (REV. 2/05)

**FILING INSTRUCTIONS:**  
BWS/BSO: Documentation/Activity Folder  
Retention: Permanent

# Identifying Available Resources

- Need to identify both internal and external resources
- NHeLP's *Language Services Resource Guide for Healthcare Providers* helps identify external resources including interpreter/translator associations and providers; training programs; translated materials; symbols; etc.

# Identifying Available Resources

- Community Resources
  - ID Department of Health and Welfare contracts with local community organizations
  - NC Division of Public Health is working with the United Hmong Association to translate its fact sheets
  - IL Department of Human Services funds the IL Coalition on Immigrant and Refugee Rights

# Community Resources

- DC Medical Assistance Administration worked with community advocates to develop its “I Speak” poster and cards and a “Know Your Rights” pamphlet


 Government of the District of Columbia  
 Anthony A. Williams, Mayor

## Do You Need An Interpreter?

If you have a problem, call the Medicaid complaint line and your health plan. (See telephone numbers below.)



- To get help, ask the receptionist and point to your language.
- You have a right to an interpreter, free of charge.
- There should not be a long wait.

**Español/Spanish << Señale aquí**

- Si necesita un intérprete, hable con la recepcionista
- No tiene que pagar por el intérprete
- No deberá esperar demasiado
- Si tiene algún problema, comuníquese con la línea de quejas de Medicaid y con su plan de salud. Los números de teléfono aparecen en la parte inferior de este afiche.

**አማርኛ/Amharic << አዚህ ጋር ይጠቀሙ**

- ለተርጓሚ ካልሌገዙት ጸሐፊውን ወይም ጸሐፊዎን ይጠቀሱ
- ለሌሎችም ወይንም ለሌሎችም
- ርዕዮ ጊዜ ጠጠቅ የለብዎትም
- “ጥር ካጠጠዎት የሚገባዎት ስራ ማረጋገጫ ጠቀሙ ወይም ኢንፎርገሽን ጋር በስልክ ደውሎ ይገልጹ። የስልክ ትርጉሚያዬ ከዚህ ማስታወሪያ ቤቅ ይገኛል።”

**中文/Chinese << 指向此處**

- 如需口譯服務，請向接待員提出。
- 口譯服務完全免費。
- 等待時間不會很長。
- 如有任何問題，請撥打健保協助投訴熱線和您的健保計劃服務電話（電話號碼見下）。

**Tiếng Việt/Vietnamese << Chỉ vào đây**

- Quý vị có quyền nhận dịch vụ thông dịch miễn phí.
- Quý vị không phải chờ đợi lâu.
- Để được giúp đỡ, xin hỏi nhân viên tiếp tân và chỉ vào ngôn ngữ mà quý vị sử dụng.
- Nếu quý vị có vấn đề rắc rối, xin gọi đường dây khiếu nại của Medicaid và chương trình bảo hiểm sức khỏe của quý vị (xem các số điện thoại liên lạc ở dưới)

**한국어/Korean << 어기를 가리키십시오**

- 통역인이 필요하면 안내원에게 물어보십시오.
- 통역비는 무료입니다.
- 오래 기다릴 필요가 없습니다.
- 만약 문제가 있으면, 메디케어/메디icaid 불만 라인과 귀하의 건강보험 회사로 연락하십시오. 이 포스터 아래에 전화 번호들이 적혀 있습니다.

**Français/French << Pointez ici**

- Si vous avez besoin d'un interprète, demandez à la réceptionniste.
- Les services de l'interprète sont gratuits.
- L'attente devrait être de courte durée.
- Si vous avez un problème, appelez la ligne Medicaid ou votre régime de soins de santé. Les numéros de téléphone apparaissent dans le bas de l'affiche.

**Português/Portuguese << Assinalar aqui**

- Você tem direito a ter um intérprete grátis.
- Não terá que aguardar muito tempo.
- Para obter ajuda, consulte a recepcionista e assinale o seu idioma.
- Se tem algum problema, ligue para a linha de reclamação do Medicaid e para seu plano de saúde. (veja abaixo os números).

**Kreyòl/Creole << Klike la**

- Si ou bezwen yon entèprèt mande resepsyonis la.
- Entèprèt la pa koute ou anyen.
- Yo pa sipouse fè ou tann anpil.
- Gen pwoblèm? Si ou vle pote plènt ha Medicaid la oubyen asirans sante ou, rele youn nan nimewo ou wè anba.

**العربي/Arabic << اشيروا هنا**

- بحاجة الى ترجمة الرجاء الاتصال بالمستقبلية.
- الترجمة مجانية (الرجاء عدم الدفع).
- الانتظار لن يكون طويلا.
- بحاجة وجود أي مشكلة الرجاء الاتصال لخط الشكاوى ميديكايد أو بشركة تأمينكم الصحي. الأرقام مرفقة بهذه المنشورة.

**Pilipino/Tagalog << Ituro dito**

- Kung kailangan mo ang tulong taga-salin o taga-paliwanag, magtanong sa taong taga-asikaso.
- Walang bayad ang paggamit sa serbisyo ng taong taga-asikaso.
- Ang paghahintay ay hindi matagal.
- Kung mayroon kang problema, tawagan ang linya ng Medicaid o ang linya ng iyong planong pangkalusugan. Ang bilang ng mga telepono ay makikita sa ibaba ng tathalaing ito.

**Русский/Russian << Укажите сюда**

- Если Вы нуждаетесь в помощи переводчика, пожалуйста, обратитесь к сотруднице(ку) в приемной.
- Услуги переводчика Вам будут предоставлены бесплатно.
- Вам не придется ждать долго.
- Если у Вас возникла проблема, пожалуйста, позвоните в Помощную линию Medicaid, или в компанию, медицинским планом которой Вы пользуетесь. Номера телефонов указаны в конце настоящего объявления.

**Yoruba/Yoruba << Tòka nihin**

- Ti iwo ba ni ilo fun onitumo, bere lowo onise wa (Receptionist)
- Iwo o ni san owo kankan fun onitumo naa.
- Ko ye ki o gba akoko pupo
- Ti o ba ni isoro, kan si ago ejo Medicaid (Medicaid Complaint line) tabi eto ilera re (Health Plan). Awon ago won wa nisale iwe yi

Government of the District of Columbia  
 MEDICAL ASSISTANCE ADMINISTRATION  
 DC Department of Health  
 625 North Capitol Street, NE  
 Room 5135  
 Washington, DC 20002

**Telephone Numbers:**

AMERIGROUP Health Right 1-800-600-4441  
 Chartered Health Plan HSCSN 1-800-408-7511  
 Medicaid 202-442-5988  
 1-866-937-4549

**Complaint Hotline 1-800-788-0342**

Designed and Printed by Benetwerk 2005

# Identifying Available Resources

- CASE STUDY: Clark County, October 2006
  - The meeting
  - The ideas
  - The results

# Identifying Available Resources

- Las Vegas Metropolitan Police Department's Hispanic Interpreter Services Program (HISP)



# Background (HISP)

## ✓ Hispanic Population

- Between 1990 to 2000 the census bureau estimated that the Clark County Hispanic population was approximately 22%
- In 2002, the estimation had increased to 24%, and it was estimated that by the year 2008, Hispanics would account for 30% of the Las Vegas population



# Background Continued

## ✓ Acquisition of Funding

- In 2002, LVMPD, with the assistance of the Latin Chamber of Commerce and Senator Harry Reid's office, submitted and obtained a grant for HISP
- HISP is now a regular LVMPD budget item



# Hispanic Interpreters Services Program

- ✔ Created in 2003
- ✔ Currently staffed with 23 part-time civilian employees (3 Leads)
- ✔ Provides oral and written language services
- ✔ Primary mode of communication between the LEP community and LVMPD
- ✔ Language interpretation certification by LVMPD only, no outside certification required at this time
- ✔ Interpreters are fluent in various dialects of Spanish, to include Cuban, Venezuelan, Nicaraguan, El Salvadorian, and Chilean



## HISP Continued

- ✔ Provides 24/7 Response to Patrol requests for Spanish language access services
- ✔ Assist Communications call-takers with LEP persons during 911 and non-emergency calls
- ✔ Provides LVMPD Spanish translation, and transcription
- ✔ Assists with Directed Patrol assignments, which involves LVMPD focusing on a problem or issue specific to the Hispanic community
- ✔ Dispatched in the same manner as a police officer (Radio)
- ✔ Responded to 5,000 calls for service in 2006

# Ensuring Quality: User Training

- Working With Interpreters
  - Working With Translators
- 
- A faint, semi-transparent image of two hands shaking is visible in the background, positioned in the lower right quadrant of the slide. The hands are rendered in a light teal color, matching the background, and are shown in a firm grip, symbolizing agreement or partnership.

# Ensuring Quality: Interpreter Training

- Neponset Health Center (MA) – employs native Vietnamese speakers trained as medical interpreters through the MMIA or Mass. DPH
- L.A. Care Health Plan –
  - offers medical interpreter training for bilingual staff of participating clinics and medical groups
  - training for health care providers (for continuing medical education credit) on how to work with interpreters

# Ensuring Quality: Assessing Bilingual Competency

- St. Joseph Health System Community Health Programs (CA) – requires assessment of staff providing services in non-English language or as interpreter
- North DeKalb Health Center (GA) – requires all bilingual staff to attend training sessions and pass test

# Ensuring Quality: Bilingual Staff

- KY Cabinet for Health and Family Services – designated Language Access Section with four trained interpreters
- LA Cty. DPSS – human resources division certifies language skills of bilingual staff
- WA DSHS – bilingual employees can provide interpretation only if certified as interpreters and documented in the employee's classification questionnaire
- NE – developing language assessment test for self-declared bilingual staff

# Ensuring Quality: Testing and Certification

- No national standards for healthcare interpreters/translators
- National Council on Interpreting in Health Care has National Code of Ethics and Standards of Practice
- Few states are exploring the issue – IN, MA, NC, OR

# Ensuring Quality: Compensating Bilingual Staff

- AZ Department of Economic Security offers a stipend of \$1,000 a year
- NC Department of Health and Human Services – pays bilingual employees at a higher grade level
- LA Cty. Department of Public Social Services gives \$100 monthly to certified bilingual workers
- KY Cabinet for Health and Family Services plans to pay qualified bilingual employees at a higher pay level

# Ensuring Quality: Use of Contract Interpreters

- KY Cabinet for Health and Family Service – qualifies community partners (both individual interpreters and language agencies) to interpret for the agency
- WA DSHS – comprehensive process to certify contract employees and only those who pass certification (in the state's seven most common languages) or assessment (for other languages) may provide services to the agency

# Ensuring Quality Translations

- NE – uses designated translators with a degree from translation program
- ID Department of Health and Welfare – works with the Idaho Migrant Council and the Hispanic Commission to review benefits forms for appropriate Spanish translation

# Ensuring Quality: Developing a LEP Policy

- Translating Justice Policy Development Workshop with the LVMPD



# LVMPD LEP Policy Development Process

- ✓ Policy development workshop facilitated by the Vera Institute
  - Vera staff met with LVMPD's key policy makers to discuss various issues and points to developing a draft language access policy
  - Goal
    - Inform and engage LVMPD's administrators in the language access planning process
    - Elicit feedback on LVMPD's draft policy
    - Discuss and resolve outstanding issues in finalizing policy



# Policy Development Process Continued

- ✓ Internal approval process
  - Distribution to mid-level managers for feedback
  - Presentation to LVMPD's Executive Staff
  - Submission to Department of Justice (DOJ)

# Ensuring Quality: Seeking Community Input

- Seek community input = seek input into the community
  - Get involved in collaborations and coalitions
  - Use the synergy to get the word out

Questions?

