Language Access Plan

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Contents

PART 1 – INTRODUCTION

Person Centered Services is a covered entity under the requirements for people who are Limited English Proficient (LEP) per 14 CRR-NY 633.4 & Section 1557 of the Patient Protection and Affordable Care Act (PPAC) and the New York State Language Access Law. This Language Access Plan describes the actions that Person Centered Services will take to allow people who are LEP to have meaningful access to services and supports as best practice even if not covered under the related regulations and laws.

Statement of Services:

Person Centered Services provides Care Coordination to over 17,000 people with intellectual and developmental disabilities throughout 18 counties in the Western New York, Finger Lakes, and Southern Tier regions. Our job is to help people and families navigate a very complex system to promote equitable access.
Care Coordinators connect people with services and referrals. They work with families and community providers to ensure comprehensive care, including addressing the social determinants of health. Those eligible can receive support from New York State's Office for People with Developmental Disabilities (OPWDD). If eligibility is still being determined, our Intake Specialists can assist with the process.

PART 2 – ASSESSING LEP POPULATION LANGUAGE NEEDS

Over 5.7 million people living in New York report speaking a language other than English. Of these, 2.5 million report speaking English less than well. Based on the 2020 American Community Survey, the top 12 most common languages among Limited English Proficient New Yorkers are: Spanish, Chinese, Russian, Yiddish, Bangla, Korean, Haitian Creole, Italian, Arabic, Polish, French, and Urdu (source: U.S. Census Bureau, Table B16001, 2020 5-year estimate. American Community Survey).

Approximately 17,500 people are enrolled in Person Centered Services. It is estimated that 2% of those enrolled are Limited English Proficient. We use data from the electronic medical record to identify the top 12 languages spoken by people we support who are LEP; the approximate data is as follows:

Language	Estimated # of individuals who are LEP that speak this language
Spanish or Castilian	169
Sign Language	60
Arabic	26
Bengali	10
Non-verbal	9
Nepali	6
Karen	5
Vietnamese	5
Ukrainian	4
Korean	3
Chinese	2
Chinese (Mandarin)	2
French	2
Somali	2

Person Centered Services records communication needs with people supported, including those with LEP, during intake and throughout their enrollment. This includes written translation and oral interpretation services in the person's primary language, as well as language adaptations for individuals who do not use speech. Communication needs, including language, are documented in the EMR and Life Plan. Once enrolled, communication can include emails, mail, phone calls, and face-to-face visits (in person or via video conference)

PART 3 – LANGUAGE ASSISTANCE

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

- LEP individuals are informed about language assistance during intake by bilingual staff or interpreters. Intake Specialists review language preferences with the person and family/representative. Care Coordinators monitor language needs and share available language supports with the person and family/representative.

We determine when a person is considered Limited English Proficient, and what the person's primary language is through the following:

- Self-reporting by the person and/or family/representative with the assistance of bilingual staff member(s) or an interpreter.
- Referrals from other organizations that determine the person's language needs

Once assigned to a Care Coordinator, the Care Coordinator will continue to assess the language needs of the person and/or the family/guardian/representative.

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

Person Centered Services records languages spoken by persons served in the EMR.

Oral Interpreting Services

Our protocol(s) for assessing whether a person with LEP needs oral interpreting services is as follows:

At initial contact in the intake process—Intake Specialists and/or Care Coordinators may use the following resources to assess language needs:

- Bilingual staff where available
- Self-reporting by the person served
- Telephonic interpretation services (guidance documents can be found in the organizations policy and procedure database ConvergePoint and/or the "CC toolbox" on Person Centered Services intranet)

For in-person encounters—Intake Specialists and/or Care Coordinators may use the following resources to assess language needs:

- Bilingual staff where available
- Self-reporting by the person served
- Telephonic interpretation services (guidance documents can be found in the organizations policy and procedure database ConvergePoint and/or the "CC toolbox" on Person Centered Services intranet)

By telephone—Intake Specialists and/or Care Coordinators may use the following resources to assess language needs:

- Bilingual staff where available
- Self-reporting by the person served
- Telephonic interpretation services (guidance documents can be found in the organizations policy and procedure database ConvergePoint and/or the "CC toolbox" on Person Centered Services intranet)

For pre-planned appointments with individuals with LEP—Intake Specialists and/or Care Coordinators will use available resources including oral or sign language interpretation services.

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**—Care Coordinators are trained to inform persons served, family members, or designees about the availability of interpretation and translation services.
- **By telephone**—Care Coordinators are trained to inform persons served, family members, or designees about the availability of interpreting services. Information is provided by either a bilingual staff member or through a qualified interpreter.
- **At initial contact**—Care Coordinators are trained to inform persons served, family members or designees about the availability of interpretation/translation services. Information is provided by either bilingual staff or through a qualified interpreter.
- **For pre-planned appointments with LEP individuals**—Team members are trained to assess, inform, and document communication needs for persons served, family members, and designees. This information is then used to secure an interpreter and any needed translated documents.

If a person served with LEP 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 will be informed about free interpreting services and offered a professional interpreter or bilingual Care Coordinator. They are encouraged to use a professional interpreter unless it is a routine matter. We will respect their preference if they choose to use a family member or friend, and this must be documented in their activity log.

Our protocol(s) for obtaining interpreter services in a timely manner is as follows:
Person Centered Services has contracts with vendors for interpretation and translation services; internally referred to as "Language Access services". The Care Coordination workforce has access to the vendor's contact information in ConvergePoint and will complete the "Language Access Form" on intranet to secure an interpreter in a timely manner for the person and/or family/guardian.

We record and maintain documentation of oral interpreting services provided to LEP persons at each encounter as follows:
Person Centered Services tracks all instances of interpreting services through our Language Access process. This process consists of a central point of contact that facilitates timely and accurate support.

Competency and Confidentiality

The linguistic and cultural competence of interpreters is evaluated individually. Person Centered Services uses bilingual staff who self-assess their language skills. For independent interpretation services, vendors ensure interpreters are trained and competent in both language and culture.

The issue of confidentiality pertaining to the use of interpreters is addressed as follows:
All team members are trained in the Health Information Portability & Accountability Act (HIPAA) and confidentiality requirements. Person Centered obtains a Business Associate's Agreement prior to using any vendor for interpreting services.

Maintaining a list of oral interpreting resources

For oral interpreting we have the following resources:
- Bilingual Care Coordinators who work directly with LEP persons
- A list of vendors that provide interpretation services which can be found on the "Interpretation Services Providers Fact Sheet"
- Person Centered Services will continue to develop community resources and identify additional resources as required

Person Centered Services team members are made aware of the availability of interpreter services through:
- Trainings and meetings
- Ongoing updates and announcements via intranet about Person Centered Services LEP program

A. Translations of Written Documents

The process to determine and reassess which vital documents (including website content) must be translated is redetermined on an ongoing basis as follows:

Person Centered Services website, including some documents in the website, is available in six languages. Additionally, some of the most used documents that are not on the website have been translated into languages Person Centered Services members use. Other documents are translated into other languages on an as-needed basis. Person Centered Services continues its partnership with other Care Coordination Organizations to obtain translated documents on an as needed basis to enhance our resources and overall collaboration. Life Plans are translated into the primary language as requested by the person/family and documented in the Life Plan.

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

Person Centered Services provides guidance to the Care Coordination workforce for translation of documents via the Language Access Policy and Standard Operating Procedure. Documents are translated 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:

Person Centered Services reviews all documents prior to implementation or translation to assure that they are in plain, accessible language as much as possible. For more information on plain, accessible language, review the “Language Guidance tool” in ConvergePoint.

The table below contains a list of translated documents in the languages indicated:

Name of Document	Language
Notice of Right to Object	Spanish, Bengali, Burmese, Nepali, Russian
Americans with Disabilities Act	Spanish, Somali
Notification Letter of Incident Management Policies	Spanish, Bengali, Nepali, Russian, Somali
Authorization Form	Spanish, Arabic, Bengali, Burmese, Karen, Swahili
General Rights and Responsibilities of Persons Receiving Services	Spanish, Bengali, Nepali, Somali, Russian
Acknowledgement of Receipt of Notice of Privacy Practices and Consent to use and Disclose Protected Health Information for Treatment, Payment, and Health Care Operations	Spanish, Arabic, Burmese, Karen, Nepali, Somali
Notice of Privacy Practices	Spanish, Burmese, Karen, Nepali, Somali
Notice for Persons Applying for Services – OPWDD Liability Notice 05	Arabic, Bengali, Chinese,French, Haitian Creole, Italian, Korean, Polish, Russian, Spanish, Urdu, Yiddish
Complaint Process Information Sheet	Spanish, Burmese, Somali, Ukrainian
Person Centered Services Liability Fees	Spanish
Person Centered Planning Notice	Spanish, Bengali, Nepali, Somali, Russian

The process for ensuring that translations are accurate and incorporate commonly used words is as follows:

Through its vendors, this organization will request that proofing/editing for correctness is a component of the translation services provided under contract. Person Centered Services will also use plain language in materials produced before translation so that information is accessible to a range of literacy levels whenever possible. Person Centered Services continues to research alternative solutions and resources to ensure translations are accurate.

For translation services we have the following resources:

- Contracts with language service vendors, refer to “Interpretation Service Providers Fact Sheet” for more information.
- Oral translations of written documents by language service vendors or bilingual staff members.

PART 4 – STAFF TRAINING

The departments responsible for the provision of training to team members in language access issues are the Learning and Development department and Care Coordination department. Both departments share responsibility for training team members on working with the person and their family/representative who have limited English proficiency.
The staff training includes the following components found in the internal Inclusion and Belonging Strategy Plan, Inclusion and Belonging Policy, Language Access Policy and SOP:

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

PART 5 – ADMINISTRATION

Plan Updates
Person Centered Services will review the LEP plan on a biannual basis and will update the plan as needed.

Complaints
The “General Person Centered Rights and Responsibilities of Persons Receiving Services” form can be found on the Person Centered Services website, 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. Person Centered Services does not retaliate or take other adverse action because a person served has filed a complaint alleging discrimination based on LEP status or needs.

The following describes the complaint process:
Members of the public have the right to access services regardless of their English proficiency.

Person Centered Services has a complaint process for persons served, guardians, and family members, which includes complaints filed in person, by phone, mail, or email. All complaints are forwarded to the Quality Assurance and Corporate Compliance (QA/CC) department for investigation. The QA/CC department sends an acknowledgement letter within 14 business days and completes the investigation within 60 business days. The QA/CC investigator collaborates with the Care Coordination leadership team and the Inclusion and Belonging team and submits findings and recommendations to the Chief Quality Officer and the Chief Program Officer. Recommendations may include staff training, LEP plan revision, additional resources, and individualized plans. All staff are trained in the complaint process.

To reach the Office for People With Developmental Disabilities (OPWDD) Language Access Contact:
OPWDD Language Access Coordinator
25 Beaver Street
New York, NY 10004
Phone number: 347-578-0681
Email: Language.access.requests@opwdd.ny.gov

PART 6 – DISSEMINATION OF PLAN

Person Centered Services Language Access Plan will be shared via the Person Centered Services website, as well as the organization's intranet.