

## BAY-ARENAC BEHAVIORAL HEALTH POLICIES AND PROCEDURES MANUAL

<b>Chapter: 12</b>	<b>Riverhaven Coordinating Agency</b>		
<b>Section: 3</b>	<b>Consumer/Provider Rights</b>		
<b>Topic: 5</b>	<b>Communication with Non-English or Limited-English-Proficient Persons</b>		
<b>Page: 1 of 5</b>	<b>Supersedes Date:</b> Pol: 2-20-03 Proc: 11-16-04, 2-20-03	<b>Approval Date:</b> Pol: 1-20-05 Proc: 9-24-07	<hr/> <i>Board Chairperson Signature</i> <hr/> <i>Chief Executive Officer Signature</i>
<b>Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 8/27/2010. For Controlled copy, view shared directory G:\\Isimage01\\BACMH_users\\bacmh_group\\Agency\\Agency_Manual.</b>			

DO NOT WRITE IN SHADED AREA ABOVE

### Policy

The Prepaid Inpatient Health Plan (PIHP), the affiliate and/or contract agencies, and its agents shall provide at no cost accurate and timely language assistance and effective communication to Limited-English-Proficient (LEP) consumers, including current and prospective consumers, families, and other interested consumers to assure them equal access to services.

### Purpose

PIHP will insure information is communicated to LEP consumers in a language which they understand.

### Applicability

- All BABH Staff  
 Selected BABH Staff, as follows: Service Access/Intake  
 All Contracted Providers:    Policy Only    Policy and Procedure  
 Selected Contracted Providers, as follows: Substance Use  
                    Policy Only    Policy and Procedure  
 BABH's Affiliates:            Policy Only    Policy and Procedure  
 Other:

### Definitions

Limited English Proficiency (LEP): The inability to speak, read, write, or understand English at a level that permits effective interaction with health care providers. LEP is the responsibility of providers of health and social services who receive Federal Financial Assistance from the U.S. Department of Health and Human Services.

## BAY-ARENAC BEHAVIORAL HEALTH POLICIES AND PROCEDURES MANUAL

<b>Chapter: 12</b>	<b>Riverhaven Coordinating Agency</b>		
<b>Section: 3</b>	<b>Consumer/Provider Rights</b>		
<b>Topic: 5</b>	<b>Communication with Non-English or Limited-English-Proficient Persons</b>		
<b>Page: 2 of 5</b>	<b>Supersedes Date:</b> <b>Pol: 2-20-03</b> <b>Proc: 11-16-04,</b> <b>2-20-03</b>	<b>Approval Date:</b> <b>Pol: 1-20-05</b> <b>Proc: 9-24-07</b>	<hr/> <i>Board Chairperson Signature</i>  <hr/> <i>Chief Executive Officer Signature</i>
<b>Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 8/27/2010. For Controlled copy, view shared directory G:\\Isimage01\\BACMH_users\\bacmh_group\\Agency\\Agency_Manual.</b>			

**DO NOT WRITE IN SHADED AREA ABOVE**

Accommodations: Internal or external resources needed to ensure the consumer is afforded meaningful access to services at no cost to the consumer. Examples include augmentative communication specialists, voice interpreters, interpreter/translation services, etc.).

### **Procedure**

A. Assessment

The PIHP will identify the non-English languages that are most commonly encountered in each field office by estimating the number of LEP consumers that are eligible for services and that are likely to be directly affected by its programs. The PIHP will complete this assessment by reviewing census data, consumer utilization data from consumer files, and data from school systems and community agencies and organizations; identifying the language needs of each LEP consumer and recording this information in the consumer's file; identifying the points of contact in the program or activity where language assistance is likely to be needed; identifying the resources that will be needed to provide effective language assistance; identifying the location and availability of these resources; and identifying the arrangements that must be made to access these resources in a timely fashion.

B. Procedure

The PIHP Access Department staff will utilize the identified Language Line for non-English speaking consumers and/or the TTY Line for hearing impaired consumers. Whenever an interpreter is needed for ongoing clinical services, the primary care coordinator and/or contract agency is responsible for contacting an identified interpreter or interpretation agency. The list of interpreters should indicate the name, language, phone number and hours of availability of the interpreter and/or interpreter service.

C. Note

Family members or friends of the LEP consumer shall not be used as interpreters unless specifically requested by that consumer after an offer of an interpreter has been made by the treating clinician and/or contract agency. Such an offer, and the response of the consumer to that offer, must be documented. Whenever an LEP consumer refuses the offer of an interpreter supplied by the treating clinician and/or contract agency and prefers

## BAY-ARENAC BEHAVIORAL HEALTH POLICIES AND PROCEDURES MANUAL

<b>Chapter: 12</b>	<b>Riverhaven Coordinating Agency</b>		
<b>Section: 3</b>	<b>Consumer/Provider Rights</b>		
<b>Topic: 5</b>	<b>Communication with Non-English or Limited-English-Proficient Persons</b>		
<b>Page: 3 of 5</b>	<b>Supersedes Date:</b> Pol: 2-20-03 Proc: 11-16-04, 2-20-03	<b>Approval Date:</b> Pol: 1-20-05 Proc: 9-24-07	<hr/> <i>Board Chairperson Signature</i> <hr/> <hr/> <i>Chief Executive Officer Signature</i>
<b>Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 8/27/2010. For Controlled copy, view shared directory G:\\Isimage01\\BACMH_users\\bacmh_group\\Agency\\Agency_Manual.</b>			

**DO NOT WRITE IN SHADED AREA ABOVE**

to use a family member or friend, the documentation must include the name, relationship, and confirmation that the consumer is not a minor. Documentation must include a brief statement of what the interpreter helped to communicate. Each individual offer must be documented in the consumer's LEP file.

If an LEP consumer elects to use a family member or friend, but the treating clinician and/or contract agency suspects that the use of this family member or friend could compromise the effectiveness of services or violate the LEP consumer's confidentiality, the treating clinician and/or contract agency may still suggest that a trained interpreter sit in on the encounter to ensure accurate interpretation. The staff of the PIHP, the affiliate agencies, and its agents shall under no circumstances ask a consumer to bring his/her own interpreter or use another consumer to interpret.

**D. Policy on Written Materials**

Written materials will be translated for each LEP group of 10% or 3,000 (whichever is less of the eligible population). Vital documents are translated for each LEP group of 5% or 1000 (whichever is less) of the eligible population, e.g., application forms, enrollment forms, letters or notices about eligibility or any change in benefits, medical or discharge information. For each language group with fewer than 100 consumers, the entity provides written notice of the right to receive oral interpretation of written materials in the primary language of the group. The contracted agency will develop a language block that will be printed directly on all forms as a means of notifying consumers of their right to obtain free language assistance.

The PIHP will be responsible for the determination of the necessity for written materials for each field office based on its study of each field office's eligible LEP population. The affiliate and/or contract agencies will be responsible for the dissemination and translation of these written materials.

**E. Notice Regarding Availability of Interpreter Services and Available Materials Translated in Other Languages**

The contracted agency will ensure notices are posted regarding the availability of interpreter services and available materials translated in other languages for LEP consumers in all entrances. It will clearly state the service is at no cost to the current and

## BAY-ARENAC BEHAVIORAL HEALTH POLICIES AND PROCEDURES MANUAL

<b>Chapter: 12</b>	<b>Riverhaven Coordinating Agency</b>		
<b>Section: 3</b>	<b>Consumer/Provider Rights</b>		
<b>Topic: 5</b>	<b>Communication with Non-English or Limited-English-Proficient Persons</b>		
<b>Page: 4 of 5</b>	<b>Supersedes Date:</b> Pol: 2-20-03 Proc: 11-16-04, 2-20-03	<b>Approval Date:</b> Pol: 1-20-05 Proc: 9-24-07	_____ <i>Board Chairperson Signature</i>  _____ <i>Chief Executive Officer Signature</i>
<b>Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 8/27/2010. For Controlled copy, view shared directory G:\\Isimage01\\BACMH_users\\bacmh_group\\Agency\\Agency_Manual.</b>			

**DO NOT WRITE IN SHADED AREA ABOVE**

prospective consumers, family, and interested persons. It will also state that consumer forms that are less commonly utilized will be orally communicated to the current and prospective consumers, family, and interested persons in their preferred, native language. These notices will describe how to request an interpreter in each language most commonly encountered other than English.

**F. Offices Responsible for Training and Compliance for LEP Policy**

The PIHP, the affiliate and/or contract agencies will train all of its new employees during orientation and all employees who have client contact regarding the LEP policy and procedures. In addition, the PIHP, and the affiliate and/or contract agencies will maintain a training registry that will record the names and dates of employees' training.

**G. Monitoring**

The PIHP will monitor compliance by annually assessing the current LEP makeup of each field office service area, the current communication needs of LEP consumers, whether existing assistance is meeting the needs of such consumers, whether staff is knowledgeable about the LEP policy and procedures and how to implement them, and whether sources of an arrangements for assistance are still current and viable.

**Attachments**

N/A

**Related Forms**

N/A

**Related Materials**

N/A

## BAY-ARENAC BEHAVIORAL HEALTH POLICIES AND PROCEDURES MANUAL

<b>Chapter: 12</b>	<b>Riverhaven Coordinating Agency</b>		
<b>Section: 3</b>	<b>Consumer/Provider Rights</b>		
<b>Topic: 5</b>	<b>Communication with Non-English or Limited-English-Proficient Persons</b>		
<b>Page: 5 of 5</b>	<b>Supersedes Date:</b> Pol: 2-20-03 Proc: 11-16-04, 2-20-03	<b>Approval Date:</b> Pol: 1-20-05 Proc: 9-24-07	_____ <i>Board Chairperson Signature</i>
			_____ <i>Chief Executive Officer Signature</i>
<b>Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 8/27/2010. For Controlled copy, view shared directory G:\\Isimage01\\BACMH_users\\bacmh_group\\Agency\\Agency_Manual.</b>			

**DO NOT WRITE IN SHADED AREA ABOVE**

### References/Legal Authority

- MACMHB presentation of “Limited English Proficiency – It’s not about Speaking English” and “Accommodating Persons with Limited English Proficiency – Initial Training for All Staff” by Dale Howe (DCH) and Dave Schneider (NMCMH).
  - Title VI of the Civil Rights Act of 1964
  - Rehabilitation Act of 1973
  - Americans and Disabilities Act
  - Executive Order 13166, 8/11/00
- LEP Press Release, HHS News, US Department of Health and Human Services, Office for Civil Rights, 8/30/00
- Policy Guidance, Title VI Prohibition Against National Origin Discrimination As It Affects Persons With Limited English Proficiency
- Riverhaven Coordinating Agency Provider Manual

<b>Submission Form</b>		
<u>Approving Body/Committee/Supervisor:</u>	<u>Author:</u>	<u>Approval/Review Date:</u>
<b>Result:</b> Deletion <input type="checkbox"/> New <input type="checkbox"/> No Changes <input type="checkbox"/> Replacement <input type="checkbox"/> Revision <input type="checkbox"/>		
<u>List reason for deletion/replacement/revision here. If replacement, list policy to be replaced.</u>		