



Saint Lucie County Health Department
AUXILIARY AIDS FOR PERSONS WITH
SENSORY, MANUAL OR SPEECH IMPAIRMENTS
AND LIMITED-ENGLISH PROFICIENCY PLAN
2007-2008



1. **General** - This plan implements Department of Health policy and procedures to provide auxiliary aids that ensure the accessibility of all Saint Lucie County Health Department (SLCHD) programs, services, and employment to persons with impaired sensory, manual or speaking skills, and persons with Limited-English Proficiency. The policy and procedures described in this plan apply to all SLCHD offices and providers who provide direct services to clients or potential clients with impaired sensory (hearing and vision), manual or speaking skills, or Limited-English Proficiency.
2. **Policy** - SLCHD and its contracted providers of client services will provide appropriate auxiliary aids to persons with impaired sensory, manual, or speaking skills and provide interpreters for persons with Limited-English Proficiency if necessary to afford such persons an equal opportunity to participate in or benefit from Department of Health programs, services, and employment. Auxiliary aids may include, but are not limited to, brailled and taped material, interpreters, readers, listening devices and systems, television decoders, visual fire alarms using strobe lights, captioned films, and other assistive devices for persons with impaired hearing or vision or with Limited-English Proficiency.
 - a) All qualified clients and potential clients are entitled to an equal opportunity to use and benefit from the programs and services of the Department of Health. This includes reasonable accommodations to ensure that SLCHD programs and services are equally accessible to and equally effective for otherwise qualified persons with disabilities who have hearing, vision, or mobility impairments. The Department of Health/SLCHD will take reasonable steps to provide services and information in appropriate languages other than English in order to ensure that Limited-English Proficiency persons are effectively informed and can effectively participate in and benefit from its programs, services, and activities.
 - b) Auxiliary aids or language interpreters will be available for use by clients, potential clients, employees, and applicants with impaired sensory, manual or speaking skills in each phase of the service delivery or employment process (e.g., telephone inquiries, requests, intake interviews, employment interviews, terms and conditions of employment, service provision, counseling and complaints), when the lack of such aids may, in effect, deny service accessibility, hinder service effectiveness, or deny persons with disabilities or Limited-English Proficiency reasonable accommodations to ensure nondiscrimination and equal opportunity.
3. **References**
 - a) Equal Opportunity, Methods of Administration, Equal Opportunity in Service Delivery. http://dohiws/Divisions/Equal_Opp/Policies/methods_of_administration.htm
 - b) Equal Opportunity, Americans with Disabilities Act Accommodations. http://dohiws/Divisions/Equal_Opp/Policies/ADA.html
 - c) Equal Opportunity, Equal Employment Opportunity. http://dohiws/Divisions/Equal_Opp/Policies/equal_employment_opportunity.htm
 - d) Section 504 of the Rehabilitation Act of 1973. http://www.access.gpo.gov/nara/cfr/waisidx_05/45cfr84_05.html
 - e) Section 508 of the Rehabilitation Act of 1973. <http://www.section508.gov/index.cfm?FuseAction=Content&ID=12>
 - f.) The Americans with Disabilities Act of 1990. <http://www.usdoj.gov/crt/ada/reg2.html>
 - g) Title VI of the Civil Rights Act of 1964. <http://www.hhs.gov/ocr/part80rg.html>
 - h) Title VII of the Civil Rights Act of 1964. <http://www.eeoc.gov/policy/vii.html>
 - i) Department of Health and Human Services, Office of Minority Health; National Standards on Culturally and Linguistically Appropriate Services (CLAS) in Health Care.

<http://www.omhrc.gov/assets/pdf/checked/finalreport.pdf>

- j) Department of Health and Human Services, Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons. <http://www.hhs.gov/ocr/lep/revisedlep.html>
- k) Department of Justice, Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons. <http://www.usdoj.gov/crt/cor/lep/DOJFinLEPFRJun182002.htm>

4. **Accountability** - Department of Health EEO coordinators, contacts, or liaisons are responsible for developing and implementing auxiliary aids and Limited-English Proficiency plans that provide for assistive devices, interpreters or readers, and physical modifications to ensure the accessibility of programs and services to clients or potential clients with sensory (hearing and sight), speaking or mobility impairments and Limited-English Proficiency.
 - a) The Inspector General is the designated Title VI, Title VII, ADA, and Section 504 Coordinator for the Department of Health with responsibility for overall coordination of developing and implementing the Department of Health Equal Opportunity and Minority Health, Methods of Administration Equal Opportunity in Service Delivery Procedures for ensuring the nondiscriminatory delivery of equally effective and equally accessible quality services. The Inspector General may be reached at 4052 Bald Cypress Way, Bin A03, Tallahassee, FL 32399-1701; Voice Phone (850) 245-4141 or SunCom 205-4141; Fax (850) 487-2168 or SunCom 277-2168; or TDD (850) 410-1451.
 - b) The EEO coordinator for the SLCHD is the Human Resources Administrator, whose office is located at 5150 NW Milner Drive, Port St. Luce, Florida, 34983. The telephone number is (772) 873-4939 or SunCom 245-4939 and the fax number is (772) 873-4960 or SunCom 245-4960.
5. **Dissemination** - Copies of this plan may be requested from the SLCHD Administrator's office located at 5150 NW Milner Drive, Port St. Lucie, FL 34983. Copies are distributed upon request to individuals or organizations serving persons with disabilities or Limited-English Proficiency.
6. **Revisions** - This plan is updated annually with a copy of all changes submitted by March 31 each year to the Office of Equal Opportunity and Minority Health.
7. **Assessment of Language Needs** - The first key to ensuring meaningful access is to assess the language needs of the population served, encountered by the program or likely to be directly affected. St. Lucie CHD will assess language needs by:
 - a) Identify the number or proportion of LEP persons eligible to be served or likely to be encountered by the program or grantee. When considering the number or proportion of LEP individuals in a service area, consider whether the minor children served have LEP parents or guardians with whom the program may need to interact. First examine past experiences with LEP encounters and determine the breadth and scope of language services that were needed. Consider language minority populations that are eligible for programs or activities, but may be underserved because of existing language barriers. Other data to be considered include: the latest census data for the area served, data from school systems and community organizations. Community agencies, schools, religious organizations, legal aid entities and others may assist in the identification of populations that are underserved because of language barriers.
 - b) Determine the frequency with which LEP individuals come in contact with the program. The more frequent the contact with a particular language group, the more likely that enhanced language services in that language will be needed. Even if service to LEP persons is provided on an unpredictable or infrequent basis determine what to do if an LEP individual seeks services. Consider whether appropriate outreach to LEP persons could increase the frequency of contact with LEP language groups.

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- c) Identify the nature and importance of the program, activity or service provided by the program to people's lives. The more important the program, or the greater the possible consequences of the contact to the LEP individuals, the more likely language services are needed. Determine whether denial or delay of access to services or information could have serious or even life-threatening implications for the LEP individual. Consider the importance and urgency of the program, activity or service. The obligation to communicate rights to a person whose benefits are being terminated or to provide medical services to an LEP person who is ill differ from those to provide medical care for a healthy LEP person or to provide recreational programming.
 - d) Identify the resources available and the cost. Resource and cost issues can often be reduced by technological advances; the sharing of language assistance materials and services and by reasonable business practices such as training bilingual staff to act as interpreters and translators, telephonic and video conferencing interpretation services.

8. Translation of Written Materials - An effective language assistance program ensures that written material that are routinely provided in English to applicants, clients and the public are available in regularly encountered languages other than English. It is particularly important that vital documents be identified and translated into the non-English language of each regularly encountered LEP group eligible to be served or to be directly affected. It is important to note that in some circumstances verbatim translation may not accurately or appropriately convey the substance of what is contained in materials written in English.

a) In order to ensure with greater certainty with compliance with Title VI obligations, the department will follow "safe harbor" requirements outlined below:

1. St. Lucie CHD provides translated written materials, including vital documents, for each eligible LEP language group that constitutes five percent or 1,000, whichever is less, of the population of persons eligible to be served or likely to be directly affected or encountered by the covered entity's program. In St. Lucie County, those language groups are speakers of Spanish and French-Creole. Translation of other documents, if needed, can be provided orally; or
2. If there are fewer than 50 persons in a language group that reaches the five percent trigger indicated in the above paragraph, the recipient does not translate vital written materials but provides written notice in the primary language of the LEP language group of the right receive competent oral interpretation of those written materials, free of cost.

b) The following is a timeline established for St. Lucie CHD to meets its Title VI obligation.

1. St. Lucie CHD programs will continue to identify locally created documents for their program area. Vital documents include, but are not limited to, applications, consent forms, letters containing information regarding eligibility or participation criteria, and notices pertaining to reduction, denial or termination of services or benefits, that require a response from beneficiaries, and notices that advise of free language assistance.
2. Locally created vital documents will be translated within three months of first publication.
3. Non-vital locally created documents that require translation will be translated to commonly encountered languages.

9. Competence of Interpreters and Translators

a) Competency does not necessarily mean formal certification as an interpreter, although certification is helpful. When using interpreters, reasonable steps will be taken to assess whether the interpreters:

1. Demonstrate proficiency in and ability to communicate information accurately in both English and in the other language and identify and employ the appropriate mode of interpreting (consecutive, simultaneous, summarization, or sight translation);
2. Have knowledge in both languages of any specialized terms or concepts peculiar to the program or activity and of any particularized vocabulary and phraseology used by the LEP person;
3. Understand and follow confidentiality and impartiality rules to the same extent as the employee for whom they are interpreting and or to the extent their position requires;
4. Understand and adhere to their role as an interpreter without deviating into other roles where such deviation would be inappropriate.

b) Translators of written documents should also be competent to translate. The skill of translating is very different from the skill of interpreting; a person who is a competent interpreter may or may not be competent to translate. Certification or accreditation may not always be possible or necessary. Competence can often be ensured by having a second, independent translator check the work of the primary translator or through the use of back translation. Translators will understand the expected reading level of the audience and, where appropriate, have fundamental knowledge about the target language group's vocabulary and phraseology. St. Lucie CHD staff will be able to help consider whether a document is written at a good level for the audience. Consistency in the words and phrases used to translate terms helps avoid confusion by LEP individuals and may reduce costs.

c) For LEP persons whose language does not exist in written form, an interpreter will be available to explain the contents of the documents.

10. Monitoring - Monitoring is accomplished through annual updates, facility surveys, validation review, complaint investigations, and other related civil rights compliance activities.

11. Documentation and Record Retention.

a) Records relating to the Auxiliary Aids and Limited-English Proficiency Plan methods and implementation, as well as, sample copies of materials, such as copies of brochures, letters, memoranda, newspaper notices, minutes of staff meetings, public service announcements on radio or TV, etc., used to inform employees or clients of this nondiscrimination policy will be documented and maintained for three years by the Human Resource Administrator.

b) Copies pertaining to a request for accommodation for an individual with a disability shall be maintained in the St. Lucie CHD in a secured area to ensure confidentiality of such information.

12. Notification - The Department of Health Nondiscrimination Policy and the Department of Health hearing-impaired poster will be displayed in each building housing employees at main entrances in lobby areas, in each facility serving clients at admission desks, waiting rooms, and bulletin boards. The name, telephone number and TDD number for the designated local contact person will be listed on the hearing impaired poster to assure accessible services to clients or potential clients or their representatives. Descriptive information on the availability of auxiliary aids and reasonable

accommodations to persons requiring assistive devices or aids will be included in announcements related to meetings, seminars, workshops, and conferences, as well as to services offered by SLCHD and its contracted providers or client services.

A vital part of compliance includes effective methods of notifying LEP persons regarding their right to language assistance and the availability of such assistance free of charge. The Department of Health Inspector General website has a link to the United States Department of Justice Language Identification Flashcard. This document can be printed and used on bulletin boards or at reception areas to identify language needs. <http://www.usdoj.gov/crt/cor/Pubs/ISpeakCards.pdf>

13. Training – SLCHD Administrator will ensure that department staff and providers of client services are trained on how to assist sensory and mobility impaired of limited English proficiency clients and potential clients to obtain assisting devices and aids, or other reasonable accommodations. Such training will include:

- a) Procedures for serving hearing impaired, sight impaired and mobility impaired or Limited-English Proficiency clients and potential clients.
- b) Awareness of hearing impairments and deafness; speech impairments; sight impairments and blindness; reading impairments and dyslexia; and mobility impairments.
- c) Communication options available.
- d) How to provide reasonable accommodations for qualified clients and potential clients, i. e., how to access or purchase auxiliary aids, interpreter services and physical modifications.
- e) Requirements for making meetings, conferences, and services accessible.
- f) Awareness of the local Auxiliary Aids and Limited-English Proficiency Plan.
- g) How to work effectively with in-person and telephone interpreters.

14. Ensuring Accessibility

- a) The St. Lucie CHD shall provide appropriate auxiliary aids to persons with impaired sensory, manual, or speaking skills, where necessary to afford such persons an equal opportunity to benefit from the service in question. To ensure accessibility of programs and services to clients or potential clients with sensory (hearing or sight), speaking or mobility impairments, SLCHD staff should follow these steps:
 1. Client needs are to be assessed by consulting with the client or potential client concerning his or her preferred communication mode, and if applicable with assigned caseworkers, counselors, parents, other family members, guardians or other representatives and the auxiliary aids coordinator. All treatment services available to other clients will be equally available to clients with sensory, speaking and mobility impairments or Limited-English Proficiency.
 2. The communication options for hearing impaired persons may include but are not limited to TDDs (Telecommunication Devices for the Deaf), FAX (Telephone Facsimile Transmittal), phone amplifiers, sign language interpreters, flash cards, lip-reading, written notes, supplementary hearing devices, charts, signs or a combination of these. TDDs will be made available for use by clients and employees who are deaf or hearing impaired when telephones are available for use by clients who are not deaf or hearing impaired.
 3. The County Health Department Administrator or division budget approval authority has the responsibility for approving the request and obtaining the appropriate auxiliary aid or interpreter. Appropriate Department of Health Finance and Accounting payment policies will be followed.

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4. Auxiliary aids will be provided in a timely manner. Provision will be made for communication alternatives when advance notice for an auxiliary aid or interpreter is not given. Client files will be documented to indicate if an auxiliary aid or interpreter is needed. If so documented, the department will arrange to have the auxiliary aid or interpreter available for scheduled appointments. When SLCHD refers a client to another provider, it will notify the provider of any auxiliary aid or interpreter need.
 5. The use of auxiliary aids or an interpreter will be at no cost to the client, employee, or applicant. Auxiliary aids or interpreters will normally be obtained within SLCHD's current resources, including the use of qualified staff, volunteers, and volunteer organizations. However, if an auxiliary aid or an interpreter is required and must be purchased or leased, payment will be made from the appropriate operating budget.
- b) Language services include, as a first preference, the availability of bilingual staff that can communicate directly with patients/consumers in their preferred language.
 - c) When bilingual staff is not available, the next preference is face-to-face interpretation provided by trained staff, or contract or volunteer interpreters.
 - d) Telephone interpreter services may be used when an interpreter is needed instantly or when services are needed for an unusual or infrequently encountered language.
 - e) The use of assistive devices (vibratory alarms) will be incorporated with relevant services (tactile communication, physical therapy) for persons with multiple disabilities such as deafness and blindness.
 - f) The use of family members or friends as interpreters could result in a breach of confidentiality or reluctance on the part of beneficiaries to reveal personal information critical to their situation. In a medical setting, reluctance or failure to reveal critical personal information could have serious, even life threatening, health consequences. A family member or friend may be used as an interpreter if this approach is requested by the Limited-English Proficiency individual and the use of such a person does not compromise the effectiveness of services or violate the beneficiary's confidentiality, and the beneficiary is advised that a free interpreter is available. The LEP individual must be offered free interpreter service first. If the individual declines the use of the free interpreter, the record must be documented to reflect that the individual declined the use of a free interpreter. Staff should suggest that a trained interpreter be present during the encounter to ensure accurate interpretation and should document the offer and any declination in the LEP person's file. The interpreter must be proficient in both English and the other language and should have received orientation and training which includes the ethics of interpreting and possess fundamental knowledge in both languages of any specialized terms and concepts peculiar to the program or activity. Interpreters could include bilingual staff, staff interpreters, volunteer community interpreters, contracted interpreter services, or telephone interpreter services. Minor children should never be used as interpreters or be allowed to interpret for a parent when the minor child is the patient/consumer.
 - g) Following are the procedures and minimum requirements for ensuring accessibility of meetings, conferences, and seminars to persons with sensory, speech or mobility impairments or Limited-English Proficiency:
 1. The unit sponsoring the activity will ensure that the facilities used for meetings, conferences and seminars are reviewed for accessibility. The requirements of the federal Americans with Disabilities Act Accessibility Guidelines (ADAAG) and the Florida Americans with Disabilities Accessibility Implementation Act will be met in regards to the location, parking spaces, meeting rooms, ramps, stages or other platforms, doors, entrances, elevators, rest rooms, drinking fountains, alarms, etc.

2. When meetings, conferences, and seminars are scheduled, information will be included in the advertisements, conference registration materials or meeting notices that sensory impaired or Limited-English Proficiency participants will be provided with necessary auxiliary aids or interpreters at no cost to themselves. The information will include the name of a contact person and a date by which the person must request such assistance. The registration process will include a method for determining the number and type of persons with disabilities or Limited-English Proficiency needing assistance as well as the type of personal assistance or accommodation requested.

h) The following provisions are required if sensory, speech, mobility impaired or Limited-English Proficiency persons plan to attend the specific meeting, conference or seminar:

1. Qualified interpreters for hearing or speech impaired persons and accessibility to Teletype (TDD) equipment. NOTE: When telephones are provided for use by participants or residents (clients, employees or the public), TDDs must be provided for participants or residents who are deaf.
2. Adequate lighting in meeting rooms so signing by interpreter can be readily seen.
3. Readers or cassette recordings to enable full participation by vision impaired persons.
4. Interpreters for Limited-English Proficiency persons.
5. Agenda and other conference materials translated into usable form for visually and hearing impaired or Limited-English Proficiency participants.
6. Parking spaces clearly marked with appropriate ramps and curb cuts will be provided for persons with disabilities.
7. Seating arrangements for persons in wheelchairs will be adapted to integrate mobility-impaired persons rather than to isolate them on the group's perimeter.
8. Entrance ramps will be available and appropriate (36" wide or wider, level with adjacent surface and a manage slope or incline of no more than one inch rise per foot, 1:12).
9. Meeting rooms will be all on one level or capable of being reached by elevators or ramps that can be independently traversed by a mobility-impaired participant.
10. Stages, platforms, etc., to be used by persons in wheelchairs will be accessible by ramps or lifts.
11. Doors operable by single effort.
12. Door handles no more than 48" from floor.
13. Elevator provided if over one story:
 1. Sensitive safety edges provided.
 2. Controls no more than 48" from floor.
 3. Controls with brailed numbers or letters.
 4. Accommodates wheelchair 29" X 45".
14. Rest rooms accessible to mobility impaired.
 1. Level access for each sex on each floor.
 2. A minimum depth of 56" and a minimum width of 60".
 3. Door clearance of 32".
 4. Grab rails provided.

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5. Shelves, racks, dispensers, etc., not more than 48" for forward reach or 54 " for side reach.
 6. Rest room signs indicating accessibility.
 7. Wheelchair accessible telephones.
 8. Accessible drinking fountains.
 9. Audible and visible fire alarms.

15. Resources

- a) The following is a partial list of other agencies that may be of assistance in ensuring accessibility for individuals with disabilities or Limited-English Proficiency:
 1. Advocacy Center for Persons with Disabilities, Inc. (850) 488-9071 or 1-800-342-0823 (Voice) 1-800 346-4127 (TDD) 1-800 350-4566 (Spanish/Creole) www.advocacycenter.org;
 2. Florida Governor's Alliance for the Employment of Disabled Citizens (850) 224-4493 or 1-888 838-2253 (Voice or TDD) (850) 224-4496 (Fax) www.abletrust.org;
 3. Florida Department of Labor and Employment Security www.state.fl.us/dles;
 4. Florida Department of Education; <http://www.firn.edu/dae4>
 5. Division of Vocational Rehabilitation 1-800-451-4327 (Voice or TDD) (850) 245-3399 (Statewide) www.rehabworks.org;
 6. Divisions of Blind Services (850) 245-0300 -800 342-1828 www.state.fl.us/dbs;
 7. Florida Alliance for Assistive Services and Technology (FAAST, Inc.) (850) 487-3278 (Voice) (850) 922-5951 (TDD) 1-888-788-9216 (850) 487-2805 (Fax) <http://faast.org>
 8. Clearinghouse on Disability Information 1-877-232-4968 Voice/TTY 850-922-4103 Voice/TTY;
 9. ADA Working Group (850)487-3423 (850) 414-8908 (FAX) (850)922-4103 (TTY) <http://www.abilityforum.com/adawg.shtml>
 10. Deaf & Hard of Hearing Services of the Treasure Coast 772-335-5546
 11. Commercial Translators or Interpreters (need to create purchase requisition):
 - McNeil Technologies may be used for non-refugee interpreters. 1-888-628-9046
 - Command Technologies is used for refugees only. 1-877-452-6482
 - Language Line Services – 1-800-654-6231 – www.LanguageLine.com
 12. The FRS, Florida Relay Service, 711, provides a Dual Party Relay System which is an accessible telephone communication relay system that allows the deaf to talk to those with no hearing or speech problems and visa versa. Employers and service providers are able to telephone a job applicant or client who is hearing impaired; and applicants or clients who are hearing impaired will be able to call and speak to the personnel offices or their counselors and social workers.

APPROVED:

Larry Lee, Administrator

May 22, 2007
Date