



Southwest Michigan

BEHAVIORAL HEALTH

Limited English Proficiency

Definition

"Limited English Proficiency"

Or "LEP" refers to an individual who cannot speak, read, write, or understand the English language at a level that permits him/her to communicate effectively with health care or social service providers.

When used to identify persons, individuals may be acknowledged as **L**imited **E**nglish **P**roficient (LEP).



LEP Basis and Intentions

- Title VI of the Federal Civil Rights Act of 1964
- Americans with Disabilities Act of 1990
- Affordable Care Act (Section 1557) effective 2016
 - Health and Human Services providers are responsible under Federal Law to **assist people** with Limited English Skills
 - Eliminate **unintentional barriers** to services
 - Ensure individuals with LEP can **effectively access** critical health and social services
 - Provide language **assistance at no cost** to persons with LEP
 - Ensure access to care is standardized – regardless of LEP status for any customer

Effective LEP Programs

The Office of Civil Rights (OCR) has found that effective LEP programs do the following:

- 1. Identify Individuals with LEP who need language assistance**
- 2. Offer Language Assistance through:**
 - a. Oral language interpretation
 - b. Translation of written materials
- 3. Provide Staff training**
- 4. Provide notice to LEP persons (that free language assistance services are available)**
- 5. Monitor and Update the LEP Program as necessary**

#1 Identifying LEP Individuals who need language assistance

- Persons who are LEP need be able to identify their language needs to staff. Posting notices in commonly encountered languages will let Persons with LEP know of the availability of the assistance and encourage them to identify their language needs.
 - Examples throughout our Region include: “I Speak” posters and cards in our common/lobby areas and our taglines on documents and publications.
- Provider agencies need to maintain a record of the language needs of all persons identifying themselves as Persons with LEP.

#2 Language Assistance Measures

- Identify the ways in which language assistance will be provided. Consider:
 - Types of language services available
 - How staff can obtain those services for individuals
 - How to respond to callers with LEP
 - How to respond to written correspondence from Persons with LEP
 - How to respond to individuals with LEP in-person
 - How to ensure competency of interpreters and translation services.
- Within our Region, each CMH has identified and made available a set of measures to offer individuals.

#3 Staff Training

Effective training ensures that employees:

- A. Know their **obligations** to provide meaningful access to information and services to Persons with LEP.
- B. Are **knowledgeable and aware** of LEP policies and procedures.
- C. Are trained to **work effectively** with in-person and telephone **interpreters/services** and how to access the established “assistance measures”.
- D. **Understand the dynamics** of interpretation between individuals, providers, and interpreters.

#4 Notice to Persons with LEP of **free** language assistance

Examples of assistance measures take throughout the SWMBH Network

- “I speak” posters and cards available at entry/Access points within the affiliation to help individuals identify their language need(s).
- Posters at entry/Access points identifying that Language Assistance is available at no cost (free).
- Vital Documents translation performed by *credentialed contract providers*. Contact your Customer Service representative for assistance.
- SWMBH Customer Handbook is translated into Spanish – and available in alternative formats to allow for assistive technology (screen readers).

#5 Monitoring and Updating the LEP Plan

It is crucial to monitor language assistance (LEP) programs to assess...

- A. the current LEP makeup of the service area
 - i. Did the make-up of the area change?
 - ii. Are there new groups to serve?
- B. the current communication/LEP needs of persons served
- C. whether existing assistance is meeting the needs of such individuals
- D. whether staff are knowledgeable about policies and procedures and how to implement assistance measures
- E. whether sources of and arrangements for assistance are still current and viable

And make updates as necessary.

Keys to Service Access for LEP Persons

Provide *effective communication* between the service provider and the Person with LEP so as to facilitate **meaningful access to** and **participation in** services.

The steps taken by a service provider must ensure that the Person with LEP is:

- * Given adequate information
- * Able to understand the services and benefits available
- * Able to receive and fully engage in the services and benefits which the person is eligible for

Language Interpretation

Interpretation is the act of listening to something in one language and translating and transmitting it in another language. **Options include:**

- 1) Hiring bilingual staff who are trained and who demonstrate competence as interpreters
- 2) Hiring staff interpreters who are competent and readily available
- 3) Contracting with interpreters who are competent and readily available
- 4) Utilizing volunteers who are competent as interpreters, are readily available and maintain client confidentiality
- 5) Utilizing a telephone interpretation services as necessary.

Language Interpretation

- Staff will not require a person with LEP to provide his/her own interpreter.
- Providers must offer **FREE** trained interpreters for individuals to participate in service contacts.
- Staff will not rely on staff other than qualified bilingual staff to communicate directly with persons with LEP.

Use of Minors as Interpreters

- Staff will not rely on a minor child to interpret except:
 - In an emergency involving imminent threat to the safety or welfare of an individual or the public, where there is no qualified interpreter immediately available.

Use of Family/Friends as Interpreters

Staff will not rely on an adult accompanying a person with LEP to interpret except:

- In an emergency involving imminent threat to the safety or welfare of an individual or the public, where there is no qualified interpreter immediately available.
- If the person with LEP specifically requests that the adult with them interpret, the adult agrees to provide assistance, and reliance is deemed appropriate for the circumstances.
 - If the person chooses to use a family/friend as an interpreter, staff will document the choice.

Use of Family/Friends as Interpreters

- Use of family/friends can result in a breach of confidentiality or reluctance on the part of the person to share personal information critical to their situation. This may compromise the effectiveness of services.
- Even if a Person with LEP elects to use a family member or friend, providers should suggest that a trained interpreter sit in on the contact to ensure accurate interpretation.
 - **Providers must document the offer and declination in the individual's file.**

Working with an Interpreter

- Communication is focused between staff and the person served, not staff and the interpreter.
- Staff should always speak clearly. Try not to use jargon or acronyms.
- If you do not believe you are getting enough information, ask the interpreter to re-phrase your questions to clarify.
 - In-person – it may be helpful to have the interpreter sit behind or close to the individual with LEP to promote eye contact with the customer.
 - When meeting in-person but using telephone interpreter service, it may be helpful to have the conversation on speaker phone

Guidelines for Written Materials

- All written materials provided to customers will use a font size no smaller than 12 point.
- Large print publications will use a font size no smaller than 18 point.
- All written materials will be written at a 6th Grade reading level when possible (some medications, diagnoses, etc. may not meet 6th Grade level).
 - Use simple/plain language
 - Spell out Acronyms
- Written materials will not contain false, confusing, and/or misleading information.

Language Taglines

Taglines in the top 15 LEP languages in Michigan will be posted in conspicuously visible font size in:

- Significant publications/communications targeted to beneficiaries, enrollees, applicants, members or the public, except small sized-communications
- Conspicuous locations where SWMBH interacts with the public
- A conspicuous location on the SWMBH website accessible from the SWMBH home page.

Taglines in the top 2 LEP languages in Michigan will be posted in conspicuously visible font size in significant communications/publications that are small-sized (postcards, tri-fold brochures).

Translation of Written Materials

- Translation is the replacement of a written text from one language into an equivalent written text in another language.
- Written materials **must** be translated into regularly encountered languages other than English spoken by a ***significant number or percentage*** of the population eligible to be served.
 - What is a significant number? [At least 5% of the population in the SWMBH region.](#)
 - What must be translated? [Vital/critical documents.](#)
 - Translation of other documents, if needed, can be provided orally.

Translation of Written Materials

- As defined in the Code of Federal Regulations (42CFR 438.10d), “vital documents” are those that are critical to obtaining services:
 - Provider Directories
 - Handbooks
 - Appeal/Grievance Notices
 - Denial/Termination Notices (Adverse Benefit Determinations)
- It may also include documents such as:
 - Consent forms
 - Ability to Pay determinations
 - Applications to receive benefits or services
 - Plan of Service documents

Translation of Written Materials

Southwest Michigan Behavioral Health

- Based on the current population numbers, at this time, **SWMBH is responsible to provide Vital Document Translation into Spanish**. We also have a machine readable (screen reader) version of our handbook posted to our website.
- For written translation outside of the documents provided by SWMBH, contact your Customer Service representative for assistance.

Documentation of LEP Activities

- All providers must inform individuals served that interpretation is available at no cost to them.
- The language choice of the applicant/person served should be clearly documented in the clinical record.
- All relevant documents must be made available in alternate format if requested, and the offer to provide them **should be clearly documented in the clinical record.**

Examples of Prohibited Practices

- Providing service that is limited in scope or lower in quality
- Lacking translation of vital documents
- Unreasonable delays in delivery of services
- Failing to inform Persons with LEP of the right to receive free interpreter services
- Requiring Persons with LEP to provide their own interpreter

Some why's:

- Family/friend interpreters may not be able to translate emotional context of behavioral health/substance use disorder issues clearly.
- Providing lesser services or making individuals wait for services is not only against Title IV and MDCH contract requirements but could endanger the life of a customer.
- If unable to read vital documents, customers may not understand the services offered, their rights, or the amount they may have to pay.

Q: Why worry about LEP?

A1: There is no official language of the United States.

A2: Sometimes use of the English Language does not make sense...

A3: If not attended to, language may have unintended meanings...

If the English language made any sense, then *“lackadaisical”*... would have something to do with a **Shortage of flowers**



When General Motors introduced the Chevy Nova in South America, it was apparently unaware that “no va” means “it won’t go” in local languages.



SWMBH Contracted Providers for Interpretation and Translation

- Direct SWMBH Contractors to meet customer needs:
 - **Voices for Health** – written translation and telephonic as well as in-person interpretation
 - To request Interpretation services, call 800-650-0310
 - To request written translation: info@voicesforhealth.com
 - Main phone (616) 233-6505
 - **Deaf Link** – American Sign Language
 - Office line: (269) 288-0464
 - **Michigan Relay Center (MRC)** – phone calls with deaf or hard of hearing customers.
 - 7-1-1
- Check with your Customer Service representative to find out who you contract with locally.

Customer Service Contacts

- Barry
 - Tina Williams
 - 269-948-8041
- Berrien/Riverwood
 - Leanne Adams
 - 866-729-8716
- Branch/Pines
 - Kammy Ladd
 - 866-877-4636
- Calhoun/Summit Pointe
 - Dawn Nichols
 - 877-275-5887
- Cass/Woodlands
 - Regina Wolverton
 - 800-323-0335
- Kalamazoo
 - Teresa Lewis
 - 877-553-7160
- St. Joseph
 - Jessica Singer
 - 855-203-1730
- Van Buren
 - Sandy Thompson
 - 269-657-5574





Thank-you

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