STRATEGIC PLAN TO IMPROVE ACCESS TO HHS PROGRAMS AND ACTIVITIES BY LIMITED ENGLISH PROFICIENT (LEP) PERSONS

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I. Introduction

On August 11, 2000, the President signed Executive Order 13166, which requires that agencies and programs take steps to ensure that Federally-funded activities are accessible to all persons who, as a result of national origin, are not proficient or are limited in their ability to communicate in the English language ("LEP" persons). Agencies were asked to meet two requirements by December 11,2000: (1) to develop guidance for recipients of Federal funds concerning their obligations under Title VI of the Civil Rights Act to provide language assistance, and (2) to develop a plan for improving LEP individuals' access to and participation in Federally-conducted programs and activities. The Department of Health and Human Services (HHS) complied with the first requirement of the Executive Order by publishing policy guidance concerning the responsibility of Federally-assisted entities for services to LEP individuals, which was developed by the HHS Office for Civil Rights (OCR)(see 65 Federal Register 52762, August 30, 2000).

With regard to the second part of E.O. 13166, each Department was required to submit to the Department of Justice a plan to improve the language accessibility of its own Federally conducted programs and activities and to take steps to implement the plan by December 11. To respond to this requirement, the offices of the Assistant Secretary for Planning and Evaluation ASPE) and the Assistant Secretary for Management and Budget (ASMB) jointly convened the Language Access Steering Committee, comprised of representatives of HHS operating and staff components. The Steering Committee is the vehicle through which our Department has developed our *Strategic Plan to Improve Access to HHS Programs and Activities by Limited English Proficient (LEP) Persons* (the Language Access Strategic Plan).

HHS has developed its language access plan in several phases. First, it asked each component to survey its programs and activities with direct public contact in order to identify the needs of LEP customers as well as those current activities and resources available to support language access. From this "snapshot," agencies were asked to develop three-year plans reflecting the institutionalization of efforts to improve language access for their customers.

From these agency-specific plans, we have developed a strategic plan for HHS that reflects our overall goals for improving language access for our customers individuals who receive services directly from HHS. The plan also includes strategies for improving technical assistance for language access services to HHS-funded entities. The plan will provide a road map for addressing our goals, while allowing individual operating divisions and programs to decide the best ways to address them, leaving room for growth and evolution as HHS learns more about the

needs of its customers.

We expect to operationalize the strategic plan over several years and incorporate the activities it references as part of our ongoing mission, at all levels of the Department. Fully achieving the objectives of the plan will require additional resources. Therefore, the pace and scope of implementation will be subject to budgetary constraints, and the Department will need to set priorities within those constraints.

II. HHS Goal

Each agency, program, and activity of HHS shall provide access to timely, quality language assistance services to limited English proficient persons.

The mission of HHS is to enhance the health and well-being of Americans by providing for effective health and human services and by fostering strong, sustained advances in the sciences underlying medicine, public health, and social services. Much of the way that HHS accomplishes this mission is through grants and other funding to state and local government agencies, non-profit agencies, hospitals and other health care providers, and universities and other research institutions. Recipients of HHS funding are required to comply with Title VI of the Civil Rights Act of 1964. OCR's recent guidance clarifies Title VI obligations with respect to individuals who are limited English proficient. Responsibility for enforcing compliance with Title VI rests largely with OCR, which investigates complaints and performs compliance reviews in entities covered by Title VI. Responsibility for informing recipients about the requirements and for providing technical assistance to recipients rests with HHS funding agencies and OCR.

HHS also has activities that are directly conducted by offices and agencies of the Department. These include, but are not limited to, care at Indian Health Service facilities, care associated with research at the National Institutes of Health Clinical Center and public information campaigns on a variety of health and human services issues.

This strategic plan focuses on what HHS can do, both in terms of providing language assistance to customers with whom it directly interacts, and in terms of using technical assistance tools to improve the ability of HHS-funded entities to provide language assistance to individuals they serve.

HHS is committed to ensuring that the programs and services we offer are accessible to the populations for whom we are responsible. The diverse missions of our many programs have in common the responsibility to address the health and social service needs of populations that are vulnerable. We are increasingly attentive to the language and cultural needs of our customers, and this strategic plan identifies the ways in which HHS expects to improve the quality of its services in the short and long term.

III. Specific Sub-Goals or Elements of HHS Strategic Plan

The following seven elements are components of the overall HHS goal, described above. The Department will strive to implement each element, establishing priorities that will best meet the needs of LEP individuals in the context of resource constraints.

Element 1. Assessment: needs and capacity

Each agency, program, and activity of HHS will have in place mechanisms to assess, on a regular and consistent basis, the LEP status and language assistance needs of current and potential customers, as well as mechanisms to assess the agency's capacity to meet these needs according to the elements of this plan.

Element 2. Oral language assistance services

Each agency, program, and activity of HHS will arrange for the provision of oral language assistance in response to the needs of LEP customers, in both face-to face and telephone encounters.

Element 3. Written translations

Each agency, program, and activity of HHS will produce vital documents in languages other than English where a significant number or percentage of the customers served or eligible to be served has limited English proficiency. These written materials may include paper and electronic documents such as publications, notices, correspondence, web sites, and signs.

Element 4. Policies and procedures

Each agency, program, and activity of HHS will have in place specific written policies and procedures related to each of the plan elements and designated staff who will be responsible for implementing activities related to these policies.

Element 5. Notification of the availability of free language services

Each agency, program, and activity of HHS will proactively inform LEP customers of the availability of free language assistance services through both oral and written notice, iIi his or her primary language.

Element 6. Staff training

Each agency, program, and activity of HHS will train front-line and managerial staff on the policies and procedures of its language assistance activities.

Element 7. Assessing accessibility and quality

Each agency, program, and activity of HHS will institute procedures to assess the accessibility and quality of language assistance activities for LEP customers.

IV. How We Will Accomplish Each Element

A. General

The HHS plan summarizes and aggregates the activities of a diverse set of programs. The process of developing the strategic plan to improve language access, and particularly the short time permitted under the Executive Order to develop this plan, has underscored the need for continuing commitment and cooperation across HHS to resolve a number of challenges and open questions. These challenges are not unique to HHS, and hence we would welcome the opportunity to work with other Departments and agencies as we all strive to implement our plans and further refine our strategies for language access.

The Language Access Steering Committee has identified several critical challenges that we will address during the next year and in the years to come:

- How can we best coordinate activities across all relevant programs in HHS, particularly
 in the regional offices that provide support to States and other grantees and recipients?
- How can we develop partnerships with HHS-funded entities that assist them in improving their language assistance? How can we more effectively share "best practices" among grantees/recipients and across HHS programs?
- How can we best leverage existing assets within the Department in order to most efficiently and effectively acquire and deploy such language services as translation or interpretation?
- To what extent should we develop consistent policies, procedures or criteria across the Department in order to improve the efficiency or effectiveness of language access services? How should the development of policies and procedures be structured within

- HHS, and what types of policies and procedures are appropriate for a distributed organization such as HHS?
- How can we build upon and improve our partnerships with organizations that represent LEP constituencies to more effectively accomplish our goals?

B. HHS Plan to Improve Language Access for LEP Individuals (FY 2001-FY 2003)

Element 1. <u>Assessment: needs and capacity</u>: Each agency, program, and activity of HHS will have in place mechanisms to assess, on a regular and consistent basis, the LEP status and language assistance needs of current and potential customers, as well as mechanisms to assess the agency's capacity to meet these needs according to the elements of this plan.

- We will develop improved mechanisms for assessing LEP status and language assistance needs of current and potential customers, particularly for outreach and assistance activities such as customer service phone numbers, clearinghouses, ombudsman activities, assessment and satisfaction instruments, and web sites.
- We will examine existing data sources (such as Census 2000 and the Census Bureau's American Community Survey) to evaluate the need for particular language services where program-specific data is not available or sufficient.
- We will share data across the Department on estimated language needs of HHS customers and of individuals that HHS-funded entities serve. This data will include information from OCR on complaints it receives from LEP individuals who allege inadequate language assistance from HHS-funded entities, as well as data from customer satisfaction surveys.
- We will continue to assess the capacity of the Department to meet the language assistance needs of LEP customers, and to the extent practicable, use coordination across HHS programs in order to maximize the efficiency with which the Department can serve its customers.
- We will work with other Departments to identify areas where coordination or collaboration would improve the efficiency with which similar services or messages can be conveyed to similar populations.
- We will explore how to identify existing staff-based knowledge of non-English languages and various cultures and how to leverage that knowledge base throughout the Department.

• We will continue the work of the Departmental Minority Initiatives Steering Committee to identify best practices and examples of needed skill sets for recruiting and the continued development of bilingual and bi-cultural staff.

Element 2. <u>Oral language assistance services</u>: Each agency. program, and activity of HHS will arrange for the provision of oral language assistance in response to the needs of LEP customers, in both face-to-face and telephone encounters.

Steps We Will Take

- We will identify the current arrangements and resources available to each program and activity for the provision of oral language assistance and make such resources known within each program. We will identify assets that can be shared across programs.
- We will research new arrangements that could provide language assistance resources more efficiently throughout the Department, such as the potential use of a central language line for oral translations.
- In response to the needs identified by the assessments and within resource constraints, we will take steps to make oral language assistance available to individuals seeking assistance from HHS programs.
- We will seek to identify and implement ways to improve the efficacy of grantees, contractors and others who are required to provide oral language assistance to LEP individuals, through clearer requirements, technical assistance, dissemination of best practices. coordinated support and other approaches.
- We will identify "best practices" in the delivery of oral language assistance services that can be used in HHS agencies and programs.

Element 3. Written translations: Each agency. program, and activity of HHS will produce vital documents in languages other than English where a significant number or percentage of the customers served or eligible to be served has limited English proficiency. These written materials may include paper and electronic documents such as publications, notices, correspondence, web sites, and signs.

Steps We Will Take

• Each program will define and identify its "vital documents" and take steps to insure that vital documents are translated where the program regularly encounters languages other than English in serving its customers.

- We will identify the current arrangements and resources available to each program and activity for the provision of written language assistance and make such resources known within each program. We will identify those assets that can be shared across programs.
- We will research new arrangements that could provide language assistance services more efficiently throughout the Department.
- In response to the needs identified by the assessments and within resource constraints, we will take steps to make written language assistance available to individuals seeking assistance from HHS programs.
- We will identify "best practices" in the provision of vital documents in languages other than English that can be used in HHS agencies and programs.
- We will seek to identify and implement ways to improve the efficacy of grantees, contractors and others who are required to provide written language assistance to LEP individuals, through clearer requirements, technical assistance, dissemination of best practices, coordinated support and other approaches.

Element 4. <u>Policies and procedures</u>: Each agency. program, and activity of HHS will have in place specific written policies and procedures related to each of the plan elements and designated staff who will be responsible for implementing activities related to these policies.

- Each agency will develop and implement written policies and procedures related to each of the plan elements, modified as needed for each program or activity with public contact.
- Each agency will designate staff who will be responsible for coordinating and implementing activities related to improving services to individuals with limited English proficiency.
- We will ensure that the policies and procedures of individual programs and agencies are shared throughout the Department, and explore what Department-wide guidance or criteria may be appropriate related to the elements in this plan.

Element 5. <u>Notification of the the availability of free language assistance services</u>: Each agency, program, and activity of HHS will proactively inform LEP customers of the availability of free language assistance services through both oral and written notice, in his of her primary language.

Discussion of Element

Addressing this element will necessarily require the development of additional capacities within the Department to provide written and oral language assistance. Therefore, HHS anticipates that as its language assistance capacities increase within individual programs, it will notify the public of the increased availability of language assistance services.

Steps We Will Take

- We will continue to distribute the OCR guidance directly and over the Internet to all current grantees/providers/contractors in English and distribute the OCR guidance in Spanish or other languages as needed, and continue to provide technical assistance to facilitate these entities' compliance with the guidance.
- We will work within the Department and with other Federal agencies to develop ways to ensure that entities applying for grants are better informed of the LEP requirements of Title VI of the Civil Rights Act. For example, the Department will address this issue in such forums as the Grants Management Committee of the Chief Financial Officers Council in its efforts to simplify Federal grants administration.
- We will develop and distribute a consumer version of the guidance that explains the services available to the customers of particular programs.
- We will highlight the availability of consumer-oriented materials in languages other than English on Department web sites.
- We will identify "best practices" in providing notice to LEP individuals that can be replicated in other HHS agencies.

Element 6. <u>Staff training</u>: Each agency, program, and activity of HHS will train front-line and managerial staff on the policies and procedures of its language assistance activities.

- We will take steps to train HHS front-line and managerial staff concerning the policies and procedures of its language assistance activities, and the resources available in each program.
- We will take steps to train HHS staff who communicate with HHS-funded entities about the requirements of Title VI and the OCR policy guidance.

- We will identify "best practices" in programs for organizational training and maintenance of proficiency that can be implemented in HHS agencies and programs.
- We will develop mechanisms to monitor the needs of LEP customers and to relate those needs into specific training for individuals identified by their programs and agencies as responsible for providing language access services.

Element 7. <u>Assessing accessibility and quality</u>: Each agency, program, and activity of HHS will institute procedures to assess the accessibility and quality of language assistance activities for LEP customers.

- We will take steps to regularly assess the accessibility and quality of language access services.
- We will identify clearly a responsible staff and/or office where customers of HHS-conducted activities with language issues can take their concerns and complaints if they feel that they are not being understood.
- We will identify "best practices" for monitoring and quality assurance procedures that can be used in language assistance activities in HHS programs and offered as technical assistance to HHS grantees, contractors, and other recipients.
- We will work to measure improvements in language access in individual programs and across the Department. We will take steps to insure that such information is collected in a manner that increases comparability across programs.
- We will disseminate information across the Department from programs assessing their language assistance services to facilitate organization-wide learning and coordination.