

Kandiyohi County Health and Human Services 2024 Limited English Proficiency Plan

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I. Purpose and Legal Authority

The following document serves as Kandiyohi County Health and Human Services' plan to meet the legal obligation of limited English proficiency requirements in compliance with:

• Title VI of the Civil Rights Act of 1964; 42 U.S.C. § 2000 et seq; 45 CFR §80, Nondiscrimination Under Programs Receiving Federal Financial Assistance Through the U.S. Department of Health and Human Services Effectuation of Title VI of the Civil Rights Act of 1964.

- Office of Civil Rights Policy Guidance, 65 Fed. Reg. 52762 (2000), Department of Health and Human Services, Office of Civil Rights, Policy Guidance on the Prohibition Against National Origin Discrimination As it Affects Persons With Limited English Proficiency (August 30, 2000); OCR Website: www.hhs.gov/ocr/lep/
- Department of Justice Regulation, 28 CFR § 42.405(d)(1), Department of Justice, Coordination of Enforcement of Nondiscrimination in Federally Assisted Programs, Requirements for Translation.
- Bilingual Requirements in the Food Stamp Program, 7 CFR §272.4 U. S. Department of Agriculture, Food And Consumer Service
- Minnesota Data Practices Act requires Minnesota government agencies to maintain the privacy of data that they collect in the course of their business. Information that is collected regarding our customers is considered private data. Except in emergency situations, this data may not be released to anyone other than the customer, our employees, or others authorized by the court or federal law, without the customers' written consent.

II. **Policy and Procedures**

A. **Persons Covered by Limited English Proficiency Plan**

Kandiyohi County Health and Human Services' Limited English Proficiency (LEP) plan is updated annually based on the need to provide meaningful access to services to our customers, prospective customers, and their families who do not speak English or who speak limited English.

В. **Definitions:**

- Limited English Proficiency Person An individual has Limited English Proficiency (LEP) if he/she is not able to speak, read, write or understand the English language at a level that allows him/her to interact effectively with Health and Human Services staff.
- Interpretation is defined as a spoken or visual explanation provided to enable two or more individuals who do not speak the same language to communicate with each other.
- Translation is defined as a written version of a document that is provided in a language different than that of the original document.

C. **Commitment to Meaningful Access**

No person will be denied access to Kandiyohi County Health and Human Services program information or programs because he/she does not speak English or communicate in English on a limited basis. Kandiyohi County will provide assistance to all customers with limited English proficiency in obtaining necessary interpreter services in order for him/her to effectively communicate with staff. Customers will be provided with meaningful access to programs and services in a timely manner and at no cost to the customer.

D. Offering Language Assistance Services

- "I Speak" signage is posted in our reception areas and interview rooms and staff have "I Speak" cards to assist our limited English proficiency customers.
- Staff will initiate an offer for language assistance to customers who have difficulty communicating in English, have difficulty reading their spoken language, or when a customer asks for language assistance.
- Staff must offer, without charge, interpretation and/or translation services to persons with limited English proficiency in a language they understand, in a way that preserves confidentiality, in a timely manner.

- The full Civil Rights Plan is prominently displayed in reception lobbies/public areas.
- Printed program applications are readily available in the local office lobby, at the outside public drop box, and to anyone who requests one.
- A complaint log is maintained that identifies complaints by volume, type, and resolution time.

Staff will appropriately code the following systems to ensure identification of clients potentially requiring Limited English Proficiency services:

- MAXIS: Workers will appropriately code the following fields on the STAT/MEMB panel for every person entered into the MAXIS system: Spoken Language (enter appropriate code from F1 Help) Written Language (enter appropriate code from F1 Help) Needs Interpreter Y/N
- PRISM: Child Support workers will appropriately code the following fields on the demographics [panel (CPDE or NCDE) for each custodial/noncustodial parent entered into the PRISM system: Primary Language (enter appropriate code from F1 Help) Interpreter Needed (enter Y/N)
- **SSIS:** Social Service workers will appropriately code language preference on the client entry screen and in case notes.

E. **Limited English Proficiency Phone Services**

- Automated phone services utilized during business hours will include a "No English" option in the main greeting that connects the caller directly to staff who can connect with an interpreter to help them assist the caller. If options for specific languages are available in the phone system, the "No English" option will still be an available option.
- Callers must be able to interact with the staff via an interpreter without being required to leave a message or call back at a later time. The agency must offer and provide language access on the spot by either a qualified interpreter, a qualified bilingual worker, Video Remote Interpreting (VRI), or telephonic interpretive services.
- When a caller indicates or the agency becomes aware of the caller needing an interpreter, use the following phrases to identify the language needed (these tips are provided in the "What to tell customers applying for SNAP" document on the SIR SNAP Resource Page):
 - Ask "What Language?"
 - If unable to identify the language, ask "What country?"
 - Then say "Wait.", place the caller on hold and connect to an interpreter following the agency's LEP plan
- Staff should not refer customers directly to interpreter providers or provide their contact information directly to customers.
- For any questions regarding acceptability of interpreting services, devices or software that staff utilize to help with interpreting or translation services, contact the Health and Human Services Director as listed under D. Responsible Authority/Complaint Process - Contact Person.

F. **Telephone Interpreter Services – Non-English**

Staff will use a county-contracted interpreter service (See Appendix) for interpreter assistance when needed. Instructions for use are available in the Appendix. These instructions are also available in each interview room and provided to staff. Staff will become familiar with how to use this service. Being familiar with the service will help staff act quickly when customers need interpreter assistance. Our reception staff will act as a

resource guide for staff. Training will be provided all new staff. Current staff will each be provided printed materials.

G. **Telephone Interpreter Services - Hearing Impaired**

For our hearing impaired customers, Minnesota Relay is available by dialing 711. Minnesota Relay is a free, federally mandated Telecommunications Relay Services (TRS) program that allows individuals who are deaf, deafblind, hard of hearing, or speech disabled to place and receive telephone calls. (Appendix D) If in-person assistance is needed for our hearing impaired clients, staff will request this service through the appropriate county-contracted interpreter service. (Appendix D)

Н. **In-Person Interpreter Services**

We primarily use well recognized county-contracted interpreter services; they have provided documentation that they will provide competent and experienced interpreters. Competency includes:

- Being bilingual and fluent in both English and the language of the limited English proficiency customer
- Accuracy and completeness
- **Impartiality**
- Confidentiality
- Registration with the Minnesota Department of Health's Interpreter Roster when appropriate.

Interpreters will have training/orientation that includes:

- The skills and ethics of interpreting
- Basic knowledge in both languages of specialized program terms or concepts
- Sensitivity to the customer's culture

For in-person interpreter services, staff will follow the instructions for each countycontracted interpreter service (Appendix).

١. Website Compliance

- Agency website displays a "No English" link to the agency phone contact information or "No English" wording with the agency phone contact information in an easily viewable and accessible location as required by the Minnesota Department of Human Services standards and federal guidance. A phone graphic accompanies the agency phone number.
- We recognize that our Agency website does not comply with the following state/federal requirement "Agency website does not use Google Translate" and are working with our software provider to meet this requirement. Individuals may come into the office or call us at 320-231-7800 and request that any website information be provided via oral communication in their preferred language that preserves confidentiality and in a timely manner.
- Agency website page(s) where SNAP information is located displays the long nondiscrimination statement (NDS) or a link to a document containing the long NDS. (FNS clarified on 12/19/22 that agency websites are not allowed to link directly to the USDA NDS website to meet the requirement, so the NDS wording must be displayed in a document format.) The wording of the long nondiscrimination statement is exactly as provided by the USDA.
- Additional Website Requirements
 - Display agency office information, such as the agency phone number, address, office hours and days.

- Provide a link to MNbenefits.
 - o Provide access to printable applications.

J. Procedure for Using and/or Distributing Forms - Non-English

Kandiyohi County Health and Human Services has access to a number of printable and electronic forms from Minnesota Department of Human Services which are available in languages other than English. Staff also have access to forms on the MAXIS system and can retrieve them. Forms can be interpreted for individuals as requested.

K. Procedure for Using and/or Distributing Forms - Blind

For our blind customers who request forms, contact the appropriate Unit Supervisor for more information.

L. **Services to Illiterate**

Staff will assess customer's literacy level and determine interpreter needs. Staff should not send forms to illiterate customers. Staff will assist customers verbally to complete the required forms if needed. If a language other than English is spoken, staff shall use an interpreter to complete required forms verbally if needed. Staff should further inform the client to contact them for interpreter services if needed when they receive a Minnesota Department of Human Services or Kandiyohi County form.

- Illiterate Non-English Speaking Customers: Staff must assist limited English proficient customers who do not read their primary language to the same extent that they would assist an English speaker who does not read English.
- English Speaking Customers Who Are Illiterate: Staff will encourage and assist customers in identifying a responsible person to assist them. Economic Support customers may designate an "authorized representative" who can act on their behalf. Departmental staff may assist customers in completing necessary paper work only in the event that the customer cannot obtain assistance from another responsible person. Staff will indicate on the form their name and date and that they completed the form at the customer's request because no other responsible person was available.

Bilingual Staff M.

Bilingual staff may be used for short questions and answers with permission from their supervisor. Kandiyohi County's policy is to randomly assign cases to available bilingual staff as caseloads are not specialized by language. Through our county-contracted services, we are able to provide efficient and consistent interpreter services to meet our customers' needs. (Appendix D)

N. Using Adult Family and/or Friends as Interpreters

Staff should never require, suggest, request, or encourage a customer with limited English proficiency to use family or friends as interpreters. Use of family or friends could result in a breach of confidentiality or reluctance on the part of the customer to reveal personal information that may be critical to their situation. Family or friends may not be competent to act as interpreters because they may not be proficient enough in both languages, may lack training in interpretation, or have little familiarity with specialized program terminology. If the limited English proficient person declines this service, the worker will document in case notes that services were offered and declined. The Interpreter Offer form (Appendix C) will be filled out and filed with the case notes.

0. Using Minor Children as an Interpreter

Minor children should never be used as an interpreter.

Ρ. When A Customer Declines Services

When a customer declines services, the worker will document in case notes that services were offered and declined. The Interpreter Offer Form (Appendix C) will be filled out and filed with the case notes.

Q. **Competency Standards for Interpreters**

We contract with contracted interpreter agencies who have provided documentation that they will provide competent and experienced interpreters. Competency includes:

- Being bilingual and fluent in both English and the language of the limited English proficient client
- Accuracy and completeness
- **Impartiality**
- Confidentiality
- Interpreters provided by agency contracts are required to be registered either with the Minnesota Department of Health MN Health Care Interpreter Roster (spoken language) or the Minnesota Department of Human Services Sign language Interpreter Referral Registry (American Sign Language (ASL) or other signed language systems).

Interpreters will have training/orientation that includes:

- The skills and ethics of interpreting
- Basic knowledge in both languages of specialized program terms or concepts
- Sensitivity to the customer's culture
- R. Program Requirements for Annual Civil Rights Staff Training
 - Agency provides annual civil rights training to all SNAP program staff and other staff who have direct contact with the public (ex. receptionists, supervisors, managers).
 - Agency provides civil rights training to new staff prior to working with SNAP or working in direct contact with the public.
 - Agency reviews the civil rights plan with all staff annually.
 - Agency ensures staff are aware of and follow the Limited English Proficiency (LEP)

S. **Notice of Rights to Language Assistance**

Kandiyohi County Health and Human Services staff will inform all customers with limited English proficiency of the public's right to free interpreter services and that these services must be provided in a timely manner during normal business hours. We have posted the "I Speak" poster (DHS-4739) in our primary reception areas and also have available the "I Speak" cards (DHS-4374) in the sixteen "primary" languages (which includes American Sign Language) identified by Minnesota Department of Human Services. Kandiyohi County Health and Human Services staff will use "I Speak" cards to help customers with limited English proficiency to be able to identify their language needs for staff. Posters will also be used throughout the Department to inform customers that language interpreters are available at no cost to them.

III. Limited English Proficiency Training for Kandiyohi County Health and Human Services Staff

Annually, Kandiyohi County Health and Human Services will distribute the Limited English Proficiency Plan to all staff so they can learn the policies and procedures required to make language assistance available to our customers with limited English proficiency. Included in this plan are Guidelines for Working with an Interpreter (Appendix A). New employees will have the Limited English Proficiency Plan incorporated into their New Employee Orientation.

Limited English proficiency training will include legal obligation to provide language assistance to customers with limited English proficiency, policies and procedures to access language assistance services and how to properly document information about the customer's language needs in the case file. All staff with ongoing customer contact are required to receive limited English proficiency updates annually.

IV. **Monitoring of the Limited English Proficiency Plan**

An evaluation will be conducted annually to determine the overall effectiveness of the plan. It will assess the current language needs of these customers to determine if these needs are being met. It will assess if our staff understand the Limited English Proficiency Plan policies and procedures, know how to carry them out, and whether language assistance resources are still current and accessible.

- A. Limited English Proficiency Plan Posted for Public Review: The Kandiyohi County Health and Human Services Limited English Proficiency Plan will be posted for public review in the reception area and on the Departmental website. The Limited English Proficiency Plan will be available in English, but interpreters will be available to translate the plan for those who do not read English who wish to read it. For those unable to read, staff will be available to read the plan to those who wish to hear it.
- B. Distribution of Limited English Proficiency Plan: Immediately upon approval, the Kandiyohi County Health and Human Services Limited English Proficiency Plan will be distributed to all staff.
- C. Adoption of a Procedure for the Resolution of Complaints: Any consumer, applicant or recipient has the right to file a complaint. The Kandiyohi County Health and Human Services Department has a formal complaint process that can be utilized to try and resolve the problem. Should that not occur, the person making the complaint will be informed in a language understandable to them, of the process to follow, making known their complaint to the Minnesota Department of Human Services or the Office of Civil Rights. The complaint procedure will conform in all respects to the Kandiyohi County Health and Human Services Department procedure included in Comprehensive Civil Rights Plans.
- D. Responsible Authority/Complaint Process Contact Person: Each Unit will be responsible for implementing this Limited English Proficiency Plan in its area. The person responsible to provide technical assistance, respond to inquiries and complaints from the public, and monitoring and updating this plan will be:

Health and Human Services Director Kandiyohi County Health and Human Services 2200 23rd Street NE, Suite 1020, Willmar, MN 56201-6611 (320) 231-7800 (general/voice) - (320) 231-6285 (fax) Or use your preferred Relay Service

Appendix A - Guidelines for Working with an Interpreter

- Be sure to speak directly to your customer, not the interpreter
- Use words, not gestures, to convey your meaning
- Speak in an audible tone and speak slowly
- Explain jargon and technical terms to the interpreter when necessary
- Use simple vocabulary
- Speak in short sentences and pause to allow the interpreter to speak
- Ask one question at a time
- Control the environment

To assist the customer, if appropriate:

- Ask your customer if they feel they understand your question and if they need to ask any questions themselves.
- Ask your customer if there is something in their culture that makes this situation different, hard to understand, difficult or embarrassing
- Ask your customer if they need anything re-explained and if your message is not understood, be prepared to say it differently.
- If you think that your message may not be fully understood by your customer, double check by saying "Tell me what you understand."

To assist the interpreter:

- Allow the interpreter to top you and seek clarification when necessary.
- Allow the interpreter to take notes if things get complicated.
- Allow the interpreter to clarify cultural issues if appropriate.

Appendix B – Interpreter Declination Form

Kandiyohi County Where The Labor Begin		ohi County heast, Willmar MN 56201		
Interpreter Offer Form (English)				
I acknowledge that Kandiyohi County [Department] has offered me interpretive services today through its worker, (listed below), and I have chosen to decline such services. However, it was explained to me today that, at any time, I may request the services of an interpreter. The services of such interpreter will be provided without undue delay and free of charge to me. The interpretive service may be provided in person or using the phone (conference call).				
တ ် ဟုဉ်ထီဉ် ပှၤကတီးကျီးထံတ ် အလာ်မး ပှဲး (ကညီကျီာ်) (Karen)				
ယအာဉ်လီးတွာ်လိာ်လၢ Kandiyohi ဟီဉ်ကစီးဒိဉ်(ဝဲးကျိုး				
) ဟုဉ်ထီဉ်ဝဲယၤ တဂ်ကတိးကျိုးထံ အတဂ်တိဈာမာဈာတမ်း တန်းအုံး ခ်ီဖြို အဝဲအပုာမာတဂ်ဖို, (တဂ်ကွဲးရဲဉ်လၢ လာ်အုံး), ဒီးယဃုထာလၢ				
ယကဂုဂ်လိ်ာ တဂ်တိစားမင္စစားတာ်မင္ အဝဲနှာ့် နှာ်လီး ဘဉ်ဆဉ်ဒီး, တန်းအုံး တဂ်တဲနှုပ်က်တုပ်ယလံလာ, တဘျီလဂ်လဂ်, ယဃ့ထီာ်				
ပု ကတိုးကျိုးထဲတာ် အတာ်မူးစား သူဝဲ အင်္ဂနဉ်လီး. တာ်ကတိုးကျိုးထဲ အတာ်တိရားမူးစားအတာမူးနှဉ် ကဘဉ်တာ်ဟွဉ်ယား လာတအို၌ "				
ာ တာမ်းယာ်မးနိုဉ် ဒီးကမ္မာ် အဘူးအလဲ ကလီလ၊ယဂ်ီးလီး. တာ်ကတိုးကိုးထံတာ် တာ်တိရေးမာရေးအတာ်မးနှဉ် ကဘဉ်တာ်ဟုဉ်ထီဉ်အီး လာနီာ်ကစာ်				
မှတမှ်၊ ခီမြို လီတဲဓိ (တဂ်ဂိႏစိ ကတိ၊တဂ်)နှာ်လီး.				
Forma de Ofrecimiento de Interprete (Spanish)				
Yo reconozco que este dia el departamento de. Kandiyohi me ha ofrecido su servicio de interpretación por medio de su empleado, cuyo nombre esta enumerado abajo, y Yo e decido declinar tal servicio. Sin embargo, también se me explico hoy que en cualquier momento yo puedo solicitar los servicios de un intérpreta. Los servicios de interpretación será provedos sin excessivo retarso y serán gratuitos para mi. Los servicios de un térpreta pueden ser proporcionados en persona o través de un sistema telefónico por medio de una llamada de conferencia.				
Foomka Turjibaanka Ugu Deeqida (Somali)				
Waxaan qirayaa in Degmada Kandiyohi Hey'ada) iigu				
deeqday adeeg turjubaan manta intey howsheydu soctot (ee hoosta ku xusan), waxaan iskey u doortay inaan adeegast turjubaan diido. Si kastaba ha ahaatee, waxaa la'ii sharaxay manta in mar waliba aan codas haro adeeg turjubaan. Waxaa la'ii fidiyay adeega turjubaan iyada oo uu wax diib u dhac ah igu iman lacag la'aan ah. Waxaa suuragal ah in adeega turjubaan la ii sameeyo iyada oo la isticmaalayo khadka taleefoonka.				
Client – Cliente – Magaca		County Worker – Firma del empleado del condado Magaca Shaqaalaha /Haya'da (daabaca)		
Client Signature	Date	County Worker's Signature	Date	
Firma del cliente	Fecha	Firma del empleado del condado	Fecha	
Saxiixa	Taariikhda	Saxiixa Shaqaalaha	Taariikhda	
Client Name (print)		County Worker's Name/Department (p	rint)	
Nombre del cliente (letra de molde)		Nombre del empleado del condado/departamento Magaca		
(daabac)			(letra de molde) Magaca Shaqaalaha /Haya'da (daabaca)	
\data1.hhs.kcmn.us\HHMmrlShared\forms\nterpreterOfferForm Eng-Span-Somall-kar 2023 05 30.dox				

Appendix C

County-Contracted Interpreter Services

Intelligere (ARCH Language Network) (Propio)

Email: info@intelligeresolutions.com Phone: 877-859-8800

West Central Interpreting Services, LLC

PO Box 20, Willmar, MN 56201 Email: mahboub2000@gmail.com Phone: 320-235-0165/cell phone 612-636-9533 Fax # 320-235-0105

Non – Contract Free Service

Minnesota Relay: Non – Contract Free Service

Minnesota Relay is a free, federally mandated Telecommunications Relay Services (TRS) program that allows individuals who are deaf, deafblind, hard of hearing, or speech disabled to place and receive telephone calls.

Minnesota Relay Outreach

Voice: 651-602-9005 / 1-800-657-3775 Video Phone: 651-964-1514 / 1-866-635-0082 Email: mn.relay@state.mn.us