

## Operational Policy

<b>Policy title:</b>	Alternate Formats and Language Access Services		
<b>Policy number:</b>	DHS OHA-010-013		
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<b>Approved:</b>	Don Erickson, DHS Chief Administrative Officer Kris Kautz, OHA Deputy Director		

### Purpose

The Department of Human Services (DHS) and Oregon Health Authority (OHA) are committed to providing interpreters, translations, and alternate formats for non-English speaking persons, limited English proficient (LEP) persons, blind, deaf, and hard of hearing persons.

### Description

This policy and its associated processes and guidelines provide specific steps and definitions for staff and agency programs to include in their respective plans to fully implement DHS and OHA language access and alternate format requirements.

### Applicability

This policy applies to all DHS and OHA staff including employees, volunteers, trainees and interns, as well as contractors and vendors.

As keepers of the public trust, DHS|OHA employees have a responsibility to comply with state and agency policies, administrative rule, and state and federal law. The DHS|OHA take this responsibility seriously. DHS|OHA employees who fail to comply with state or agency policy, administrative rule, or state and federal law may face discipline, up to and including dismissal from state service. Volunteers, trainees, interns and contractors will be subject to the same standards up to and including termination of service.

### Policy

1. DHS|OHA shall foster an inclusive environment where different communication needs are identified and met.
2. DHS|OHA shall identify actions to decrease communication barriers that prevent individuals from accessing services provided by DHS|OHA.
3. DHS|OHA staff shall inform individuals seeking services of the availability of alternate services, forms, formats, and activities.
4. Each DHS|OHA program shall include in their delivery of services, access to resources to improve communication, including:
  - a. Spoken and sign language interpreters.
  - b. Certified interpreters for deaf, blind, and deaf with additional barriers.

- c. Communication Access Real-time Translation (CART).
  - d. Assistive Listening Devices (ALDs).
  - e. Reasonable alternate methods of communication as requested by individuals with limited English proficiency, people who are blind, people who are deaf, and people who are hard of hearing.
5. DHS|OHA shall provide these services to individuals at no cost to the individual.
  6. DHS|OHA programs that use Video Remote Interpreting shall ensure that equipment, wired and wireless connections, and staff training meet the quality standards required by the Americans with Disabilities Act and section 1557 of the Affordable Care Act.
  7. For job duties that need to be performed by bilingual staff, DHS|OHA shall only use staff who have met the agency proficiency standards to perform those duties.
  8. When a bilingual staff person is required to meet the needs of a service recipient or to perform tasks, staff who receive a bilingual differential shall be made available to provide those services or perform those tasks in any language for which they receive the differential.
  9. DHS|OHA shall provide documents and forms in the individual's preferred format, including alternate languages and fonts, Braille, contrast, and audio files.
  10. DHS|OHA shall post notices of nondiscrimination and signage explaining the availability of language services in the state's top 15 non-English languages in conspicuous physical locations where the entity interacts with the public.
  11. DHS|OHA shall include a notice of nondiscrimination and language access insert in all medical related documents that are "significant".
    - a. Each medical program shall establish criteria to determine what documents are "significant" and must apply it consistently when making a determination on whether the notice must be included.
    - b. Considerations for defining significant shall include:
      - A. Is the person required to fill out the document?
      - B. Does the document contain critical information about benefits, billing, pharmacy, rights, consent to care, or provider information? If yes, then likely the document is significant.
  12. All DHS|OHA event notices shall contain the following statement to ensure access: Everyone has a right to know about and use DHS|OHA programs and services. DHS|OHA provide free help. Some examples of the free help DHS|OHA can provide are: sign language and spoken language interpreters, written materials in other languages, braille, large print, audio and other formats. If you need help or have questions, please contact [your contact name] at [your contact telephone number], 711 TTY, [your contact email] at least 48 hours before the meeting.

## References

[Title VI of the Civil Rights Act](#)

[Title II of the Americans with Disabilities Act of 1990](#)

[Section 504 of the Rehabilitation Act of 1973](#)

[LEP Policy Guidance for HHS Recipients](#)

[ORS 659A.103 Prohibiting Discrimination Against Individuals with Disabilities](#)

[ORS 411.970 When Bilingual Services Required](#)

[DHS Administrative Rules Chapter 407, Division 005](#)

[OHA Administrative Rules Chapter 943, Division 005](#)

[Section 1557 of the Patient Protection and Affordable Care Act](#)

[OHA Language Access Policy Page](#)

## Forms referenced

### [Request a Translation](#)

Language Access Definitions

Bilingual Roles Q&A

DHS 0170, Client Complaint or Report of Discrimination: (PDF: [English](#), [Spanish](#), [Russian](#))

DHS 0170A, Review of Client Complaint: ([Word](#)) ([PDF](#))

DHS 0171, Client Comment: (PDF: [English](#), [Spanish](#), [Russian](#))

DHS 0173, Request for ADA Reasonable Modifications ([PDF](#))

[OHA 2993, OHA Nondiscrimination Policy and Language Access Insert](#)

[OHA 2996 Nondiscrimination Policy for the Public](#)

OHA 2997, OHA Report of Discrimination: (PDF: [English](#), [Spanish](#), [Russian](#), [Vietnamese](#), [Somali](#), [Simplified Chinese](#))

## Related policies

DHS|OHA 010-015 Bilingual Proficiency Certification

[DHS-010-005-01 Filing a Client Complaint or Report of Discrimination](#)

[DHS-010-005-02 Scheduling a Sign Language Interpreter and Real-Time Captioner](#)

[DHS-010-005-03 Ordering Documents in Alternate Format](#)

[DHS-010-005-04 Requesting Reasonable Modifications by Client Applicants, Clients and Members of the Public](#)

[DHS-010-005-05 Using the Oregon Telecommunications Relay Service](#)

## Contact

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503-373-7120

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