

LANGUAGE ACCESS PLAN FOR LIMITED ENGLISH PROFICIENT INDIVIDUALS

State Agency: New York State Department of Health

Effective Date of Plan: October 1, 2022

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This document is our agency’s **Language Access Plan**.

A **Language Access Plan** explains how we provide services to people who have limited English proficiency.

This **Language Access Plan** includes information about:






	The Limited English Proficient (“LEP”) population in our service area.
	How we notify the public about language access services.
	Our resources and methods for providing language access services.
	How we train our staff to provide language access services to the public.
	How we monitor language access services and respond to complaints.

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PART 1 – Our Agency’s Services

We prepared this Language Access Plan (“Plan”) to comply with New York State Executive Law Section 202-a, which establishes New York’s Statewide Language Access Policy. This Plan explains how we make sure that Limited English Proficient (“LEP”) individuals have meaningful access to agency services, programs, and activities.

In this Plan, LEP individuals are understood as people who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English.

Our agency’s services to the public include:

The New York State Department of Health (Department) protects and promotes the health of the people of New York by preventing epidemics and the spread of disease; promoting healthy lifestyles for children and families; protecting against hazards in homes, work, communities and the environment; assuring access to high quality health care; and preparing for and responding to emergencies. As part of the Department’s mission to promote healthy lifestyles and to protect the health of the people of this state, the Department seeks to ensure that all individuals, including those with limited ability to read, speak, write or understand English, are able to access our services, programs and activities.

PART 2 – The Limited English Proficient Population in Our Service Area



The Statewide Language Access Policy requires state agencies to translate vital agency documents into the top 12 most commonly spoken non-English language among limited English proficient New Yorkers. Our agency uses U.S. Census data (including data from the American Community Survey) to determine the top 12 languages most commonly spoken by LEP individuals in New York State.

The top 12 languages spoken by LEP individuals in New York State are:

#	Language	Estimated Number of LEP Speakers
1	Spanish	1,166,777
2	Chinese	375,924
3	Russian	119,160
4	Yiddish	71,740
5	Bengali	66,980

6	Haitian Creole	53,335
7	Korean	51,285
8	Italian	44,128
9	Arabic	41,632
10	Polish	33,125
11	French	30,770
12	Urdu	28,827

New York’s language access law also provides agencies, in consultation with the Office of Language Access, the option to add up to four more languages of translation beyond the top 12. The assessment about whether to include additional languages must be based on factors that are identified in the language access law. Our agency, in consultation with the Office of Language Access, has made the following determination with regard to the addition of languages beyond the top 12:

DOH’s assessment as to the necessity of additional languages of translation beyond the top 12 remains ongoing at this time. DOH, in consultation with the Office of Language Access, will update this Plan when this assessment has been completed and a final determination reached. DOH will continue to reassess the need for additional languages of translation on an ongoing basis.

Our agency tracks encounters with LEP individuals in the following ways:

Upon initial contact with any of the Department program areas providing direct public services, language needs are determined and documented by program staff. Additional data is gathered from: contact with program staff who assist LEP individuals; advocacy groups; Department contractors; and local municipal staff. Frequency of contact is based on the LEP individual’s level of need and may occur in various settings or circumstances. Some examples of contacts with LEP individuals include, but are not limited to, the following: (1) contacts occurring when the LEP individual applies to obtain services or benefits under programs administered by the Department; (2) contact with LEP individuals through the AIDS Institute wherein the Department staff contact known partners of persons infected with HIV or AIDS, or conduct HIV/STD testing in the field; (3) contact with LEP individuals when such individuals seek information or documentation maintained by the Department, including birth, death or marriage certificates; (4) during the course of the Department’s monitoring and oversight role, which includes home/health care facility visits, surveillance, and inspections, such as inspections of summer camps and restaurants; and (5) communication with individuals and groups seeking written resources and social media for the public at large during a health crisis.



PART 3 – Public Outreach About the Availability of Language Access Services

Our agency informs LEP individuals about their right to free language assistance services in the following ways, using at least the top 12 languages shown in Part 2 of this Plan:

- LEP individuals are directly informed by our staff

In which ways? If an individual indicates a need for language assistance at any point of public contact (in person or by phone), staff informs them of the services that are available with the assistance of the “I Speak” tool, contracted vendors, or bilingual staff if available.

- Signs posted about language assistance services

- In areas operated by the agency and open to the public

- Other (describe)

The Department’s website informs the public about free language assistance services. It also offers translated links to current public and community health concern announcements, emergency disease notifications, the New York State of Health, the AIDS Institute and Rape Crisis and Sexual Violence Prevention Bill of Rights and Emergency Information, COVID-19 general information and testing sites and COVID-19 Vaccination information.

- Information is published on our agency’s website in at least the top 12 languages spoken by LEP individuals in New York State

- Outreach and presentations at schools, faith-based groups, and other community organizations

What are the LEP populations targeted? In addition to the languages indicated in the chart in Part 2 of this Plan, outreach may be conducted to LEP populations based on community need.

- Local, non-English language media directed at LEP individuals in their languages

What are the LEP populations targeted? Select press releases are available in Arabic, Bengali, Chinese, Haitian-Creole, Italian, Korean, Polish, Russian, Spanish, Yiddish, Urdu, and French.

- Social media posts directed at LEP individuals in their languages

What are the LEP populations targeted? COVID-19 vaccination social media resources are available in Spanish. Social media graphics to promote the fair and equitable distribution of the COVID-19 vaccine are available in Spanish, Chinese, Haitian Creole, Korean, Russian and Bengali.

- Telephonic voice menu providing information in non-English languages

In which languages? The New York State Dept. of Health has individual telephonic prompts for Arabic, Bengali, Chinese, Haitian Creole, Italian, Korean, Polish, Russian, Spanish and Yiddish. Staff contacts the OPI Language Service Provider and requests interpreters for additional languages on an as needed basis. Currently, two language services providers each provide over 100 languages for use.

- Other (describe)

Information regarding NYS Relay 711 or (1-800-421-1220) is shared with Department staff for COVID-19 initiatives to serve the deaf and hard of hearing community.



PART 4 – Provision of Language Access Services

A. Determining the Need for Services

During *in person* encounters, our agency uses the following tools to determine whether an individual is LEP, and what their primary language is:

- “I Speak” posters or visual aids that provide information about free interpreting services in multiple languages
- Reception staff make those determinations based on training and experience
- Bilingual staff members, where available, assist in identifying LEP individual’s language
- Other (describe) Self-identification by the individual during the encounter; referral from an outside source.

On *telephone calls*, our agency uses the following tools to find out if an individual is LEP, and what their primary language is:

- Reception staff make those determinations based on training and experience
- Bilingual staff members, where available, assist in identifying an LEP individual’s language
- Telephonic interpreting service
- Other (describe) Menu options provided in languages other than English

Our agency’s protocols for assessing whether an individual needs *oral interpreting services* in different service situations is as follows:

During office in-person encounters: The need for an interpreter may be determined by reception staff with the assistance of bilingual staff members, “I Speak” posters, self-identification by the LEP individual, or through a referral from outside sources. “I Speak” posters have been distributed to staff.

At initial contact in the field: “I Speak” cards will be utilized by field staff and telephonic interpreting services can be employed through cell phones and other similar devices. In addition, bilingual staff may assist in the field, dependent on community need, when available.

When speaking on the telephone: Telephone contacts to programs from LEP individuals are handled by telephonic interpreting services under contract with the Department. In addition, bilingual staff may assist with calls when available.

For pre-planned appointments with LEP individuals: Information concerning language needs is gathered as appointments are made. The need for an interpreter may be determined by reception staff with the assistance of bilingual staff members, self-identification by the LEP individual, or through a referral from outside sources.

Other (describe):

Our agency records and maintains documentation of each LEP individual’s language assistance needs as follows:

Programs within the Department identify which languages are needed for persons accessing their programs. Invoices, which reflect the use of language assistance services, are documented in a centralized database. The information derived from the database will assist the Language Access Coordinator in evaluating the effectiveness of the Plan and the services being provided.

B. Oral Interpreting Services

Our agency has made the following resources available for oral interpreting requests:

Bilingual staff members who work directly with LEP individuals

Number of staff and languages spoken: A total of three staff are in parenthesis language titles, with the language being Spanish.

Bilingual staff members who provide oral interpreting services on a volunteer basis

Number of staff and languages spoken:

Telephonic interpreting service

Vendors: Vendors under the NYS Office of General Services (OGS) Statewide Administrative Services Contract.

- Contracts or other arrangements with school and community organizations

Number of staff and languages spoken:

- Other (Describe)

The Department works to secure in-person interpreters or translation services outside of OGS vendors for unique situations when the contracted vendor is not able to provide an interpreter or the type of translation services requested.

Our agency protocols for informing LEP individuals that free interpreting services will be provided and that they do not need to provide their own interpreters is as follows:

During office in-person encounters: The need for an interpreter may be determined by reception staff with the assistance of bilingual staff members, “I Speak” posters, self-identification by the LEP individual, or through a referral from outside sources. “I Speak” posters have been distributed to staff. “I Speak” wallet cards have been disseminated to staff in the field to have available at COVID-19 vaccination points of distribution.

At initial contact in the field: Staff in the field utilize the “I Speak” card to assist in identifying the language of an LEP individual. Bilingual staff, if available in the field and fluent in the language of the LEP individual, will inform the LEP individual that they do not need to provide their own interpreter and that free interpreting services are provided.

When speaking on the telephone: Staff inform the LEP individual that they do not need to provide their own interpreter and that free interpreting services will be provided. Staff also utilize telephonic interpreting service to notify LEP individuals.

For pre-planned appointments with LEP individuals: Information concerning language needs is obtained as appointments are made. Reception staff with the assistance of telephonic interpreter or bilingual staff members when available will notify an LEP individual that free interpreting services are available.

Other (describe): The NYS Department of Health website informs the public about the availability of free language assistance services. Staff provide this information onsite at the point of contact with the individual.

Our agency’s protocols for obtaining interpreting services in a timely manner is as follows:

When it is determined that an interpreter is needed, programs arrange for interpreter services for scheduled appointments: telephonic, VRI or Remote interpreter services are utilized as needed; or bilingual staff who are available and have been identified who may assist the LEP individual, with the understanding that they are communicating in the individual’s preferred language and not interpreting.

If an LEP individual insists on using a family member, friend, or other person as an interpreter, our protocols for deciding whether to accept or decline such an arrangement is as follows:

LEP individuals that come into contact with our agency will be informed of the availability of interpreting services provided at no cost to them. Generally, an LEP individual may not use a family member, friend, or a minor as an interpreter. However, during emergencies or upon request by the LEP individual, the LEP individual may be permitted to use a minor, a family member or friend as an interpreter for routine matters, such as asking the location of the office, hours of operation or rescheduling an appointment. Where the interaction with the LEP individual occurs at the agency's office, and an individual is permitted to use an interpreter of their choosing, they must fill out a written consent/waiver form. Where an LEP individual is engaged in official business with the agency, the agency will always provide an independent interpreter. An LEP individual will not be permitted to provide an interpreter of his or her choosing when filling out applications or when involved in other legal matters.

Our agency provides information to all staff members who have contact with the public about how to obtain oral interpreting services. Our protocol in this regard is as follows:

Mandatory annual training is required for all staff. Training is administered through the Statewide Learning Management System (SLMS) with both a general training course and a Department-specific course. The NYS DOH SharePoint site provides contact information to the NYS DOH LAC and instructions to access interpreting and translation services. NYS DOH OMH-HDP provides staff training in addition to SLMS training to ensure awareness of the availability, accessibility, and appropriate utilization of translation and interpreting Department resources.

The agency's Language Access Coordinator ("LAC") maintains a list of oral interpreting resources that are available to staff. This resource list includes:

- Names and contact information for all resources
- Names and locations of staff members who are available to act as interpreters or provide services directly in an LEP individual's primary language
- Languages in which each interpreter or service is qualified
- Procedures for accessing each interpreter or service

Our agency records and maintains documentation of oral interpreting services provided to LEP individuals at each encounter. Our protocol in this regard is as follows:

Programs within the Department identify the languages needed for persons accessing their programs. Invoices, which reflect the use of language assistance services, are documented in a

centralized database. The information derived from the database will assist the Language Access Coordinator in evaluating the effectiveness of the Plan and the services being provided. The Department also utilizes interpreting services obtained through a statewide contract, which provides detailed monthly reporting on the services provided to LEP individuals.

Cultural Competence and Confidentiality

Our agency makes sure interpreters are culturally competent¹ in the following ways:

The Department utilizes interpreting services obtained through a statewide contract and works with the vendors to ensure the vendor implements quality assurance standards to ensure that its interpreters are trained and are linguistically and culturally competent.

Our agency makes sure interpreters follow state and federal confidentiality protocols in the following ways:

All Department staff in programs identified as covered programs under Health Insurance Portability and Accountability Act (HIPAA) are trained in HIPAA and confidentiality compliance. Interpreters under contract with the State must comply with confidentiality requirements, including applicable HIPAA requirements. The training provided to staff will address the importance of confidentiality. Furthermore, independent interpreters will enforce standards of confidentiality in accordance with NYS Law. Vendors are also asked to submit information for policies and trainings regarding confidentiality and their Code of Ethics.

C. Translations of Documents

At least every two years after the effective date of this Plan, our agency determines and reassesses vital documents² that must be translated. This process is accomplished in the following ways:

Documents determined to be vital include intake and consent forms; notice of rights, requirements, and responsibilities; and such others that contain pertinent information to assist in accessing program benefits. Programs within the Department will determine which documents are vital and in need of translation. The Public Affairs Group will review forms and documents the program has identified as being vital prior to translation. All translated documents will be

¹ Cultural Competence is defined as *a set of congruent behaviors, attitudes, and policies that come together in a system or agency or among professionals that enables effective interactions in a cross-cultural framework*. U.S. Department of Health and Human Services, Office of Minority Health. 2000. Assuring Cultural Competence in Health Care: Recommendations for National Standards and an Outcomes-Focused Research Agenda. Extracted from: https://minorityhealth.hhs.gov/Assets/pdf/checked/Assuring_Cultural_Competence_in_Health_Care-1999.pdf

² Vital Documents is defined as any paper or digital document that contains information that is critical for obtaining agency services or benefits or is otherwise required to be completed by law.

reviewed and monitored as part of our Language Access Plan. In addition, individual requests for translation of confidential materials are also addressed. Upon receiving a document or correspondence from an LEP individual in their primary language, the said document or correspondence will be sent to the selected vendor for translation in a timely manner.

Our agency’s process for making sure documents are written in plain language³ before they are translated into other languages is as follows:

The Department is recognized nationwide for its plain language and health literacy efforts. The Department LAC has led activities which resulted in the following: the Department is the first state department of health in the nation to hold a health literacy summit to ensure the principles of health literacy and plain language are infused across all state and academic organizations, and the first state department of health to conduct an organization-wide health literacy survey and program assessment to identify and support health literacy and plain language principles in its work. In addition, NYS DOH is the first department of health at the state level to host a Healthy People 2030 remote event to discuss their newly adopted definition of Health Literacy, and the first department of health at the state level to host the Institute for Healthcare Advancement to provide an overview of the only Health Literacy Certificate Program currently in existence. Department materials are developed and assessed via staff representation of multiple programs to ensure clear and effective communication.

Our agency has the following resources available for translation of documents:

- Contracts with vendors for translation services

Vendors: Geneva WorldWide, LanguageLine Solutions, and potentially any vendor under the OGS Statewide Administrative Services Contract.

- Contracts or other arrangements with schools and community organizations

Names of schools/organizations:

- Translation of documents by bilingual staff members

- Other (describe)

Partner with other state agencies who have vendor approved language service providers.

The agency’s Language Access Coordinator (“LAC”) maintains a list of translation resources that are available to staff. This resource list includes:

- Names and contact information for all resources

³ The Plain Writing Act of 2010 defines plain language as writing that is clear, concise, well-organized, and follows other best practices appropriate to the subject or field and intended audience. Extracted from: <https://www.govinfo.gov/app/details/PLAW-111publ274>

- Names and locations of staff members who are available to provide translations of documents
- Languages in which each translation service is qualified
- Procedures for accessing each translation service

Our agency translates documents that LEP individuals submit in their primary languages in a timely manner. Our protocol in this regard is as follows:

Upon receiving a document or correspondence from an LEP individual in their primary language, the said document or correspondence will be sent to the selected vendor for translation in a timely manner. OMH-HDP staff also requests vendors to provide an estimated delivery date for the documents.

The following non-exhaustive list of documents are currently translated or in the process of translation by our agency in the languages indicated. Documents with an asterisk (*) are determined by the agency to be vital documents.

- AR: Arabic
- BE: Bengali
- CH: Chinese
- FR: French
- HA: Haitian-Creole
- IT: Italian
- KO: Korean
- PO: Polish
- RU: Russian
- SP: Spanish
- UR: Urdu
- YI: Yiddish

Form #	Name	Top 12 Languages												Additional Languages
		AR	BE	CH	FR	HA	IT	KO	PO	RU	SP	UR	YI	
*1.	HIV Uninsured Care Programs	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
*2.	New York State Confidentiality Law & HIV	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
*3.	Need Help Paying for Prep (AIDS Institute)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	
*4.	Prep Yourself Against HIV (Brochure)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
*5.	ADAP Privacy Notice	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
*6.	ADAP Language Sheet	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
*7.	PrEP- AP (ADAP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	

*8.	PrEP – AP Card (ADAP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
*9.	Expect The Test - Brochure	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
*10.	Early Intervention Program: A Parent’s Guide (58-pages Booklet)	✓	✓	✓	✓	✓	✓	✓		✓	✓		✓	Greek, Hmong, Japanese, Khmer, Laotian, Punjabi, Vietnamese
*11.	Newborn Screening		✓	✓	✓	✓	✓	✓		✓	✓		✓	Vietnamese
1*2.	Ready, Set, Grow with WIC	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Farsi, Hindi, Karen, Nepali, Somali, Turkish, Vietnamese
*13.	WIC Participants Rights and Responsibilities	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Farsi, Hindi, Karen, Nepali, Somali, Turkish, Vietnamese
14.	WIC Benefits Discontinued Letter		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		Burmese, Farsi, Hindi, Karen, Nepali, Somali, Turkish, Vietnamese
15.	WIC Graduation Letter		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		Burmese, Hindi
16.	WIC – No Longer Eligible Letter		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		Burmese, Hindi
17.	Handling Concerns About Care & Services in Nursing Homes			✓		✓	✓	✓		✓	✓			
18.	Managed Care Bill of Rights			✓		✓	✓	✓		✓	✓			
19.	NYS Proxy Law: Appointing Your Health Care Proxy			✓		✓	✓	✓		✓	✓			
20.	Your Rights as a Hospital Patient In New York State (available on DOH website only)			✓		✓	✓	✓		✓	✓			
21.	Your Rights as a Nursing Home Resident in New York State			✓		✓	✓	✓		✓	✓			
22.	NYS Immunization Information System			✓		✓		✓		✓	✓			
23.	New York State Requirements for School Entrance/Attendance			✓		✓		✓		✓	✓			
24.	How to Choose a Medicaid Managed			✓		✓		✓	✓	✓	✓	✓		Hebrew, Hindi, Laotian, Vietnamese

	Care Health Insurance Plan													
*25.	Medicaid Enrollment Submission of Application on Behalf of Applicant			✓		✓	✓	✓		✓	✓			
26.	Office of Professional Medical Conduct Complaint Form			✓		✓	✓	✓	✓	✓	✓			
27.	Organ Donors Save Lives Brochure		✓	✓		✓		✓		✓	✓			Italian
28.	Pulse Oximetry Screening for Critical Congenial Heart Disease Information for Parents and Guardians			✓	✓	✓	✓	✓		✓	✓			
29.	Pulse Oximetry Screening for Critical Congenial Heart Disease. What does a low result mean?			✓	✓	✓	✓	✓		✓	✓			
*30.	Access NY Office of Health Insurance Programs (and Supp A)	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
31.	Medical Marijuana Patients Brochure (NYS Patient Information)	☐	✓	✓		✓	✓	✓	☐	✓	✓		☐	
32.	Zika Virus Fact Sheet			✓		✓	✓	✓		✓	✓			Portuguese
*33.	Partner Services Let's Talk About You!	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
*34.	Hepatitis C Testing Law. Consumer Fact Sheet	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
*35.	Hep C: Get Tested. Get Treated. Get Cured	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
36.	Medical Orders for Life- Sustaining Treatment											✓		
37.	Essential Plan Fact Sheet		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, French, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Urdu, Vietnamese
38.	Enrollment Period Fact Sheet		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese

39.	How to Select a Health Care Plan Fact Sheet		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
40.	Immigrant Fact Sheet		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*41.	NY State of Health – Poster	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
*42.	NY State of Health – Rack Card	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*43.	DACA Rescission Fact Sheet	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*44.	At a Glance Cards (Medicaid, Child Health Plus, Essential Plan, Qualified Health)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*45.	NY State of Health - Postcard	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*46.	NY State of Health – Young Adults	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*47.	A Guide to the Appeals Process – Individuals and Families	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*48.	NY State of Health- Why you Need Health Insurance Fact Sheet		✓	✓	✓	✓	✓	✓		✓	✓			
*49.	Guide to Form 1095-A Brochure		✓	✓	✓	✓	✓	✓		✓	✓			
*50.	Facts About Temporary Agricultural Workers (H- 2A Visa Holders) and Health Insurance		✓	✓	✓	✓	✓	✓		✓	✓			
*51.	Facts About Student Visa Holders and Health Insurance		✓	✓	✓	✓	✓	✓		✓	✓			

*52.	Common Health Insurance Terms & Definitions		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
*53.	Benefits Before Deductibles Fact Sheet	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*54.	Family Dental Coverage Fact Sheet	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*55.	Pediatric Dental Coverage Fact Sheet	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*56.	COVID-19 Insurance Options Fact Sheet	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*57.	COVID-19 Insurance Changes Fact Sheet	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*58.	NYSOH COVID-19 Grace Period and Special Enrollment Periods QA's		✓	✓		✓		✓		✓	✓			
*59.	American Rescue Plan Fact Sheets	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi, Japanese, Karen, Nepali, Somali, Swahili, Tigrinya, Twi, Vietnamese
*60.	NYSOH Care at Home Poster	✓	✓	✓		✓		✓		✓	✓		✓	
*61.	NYSOH Care at Home Rack Card	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
*62.	Medicaid, CHP, EP Changes Fact Sheet	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
63.	OHIP Fact Sheet EVV and You		✓	✓		✓		✓		✓	✓			
64.	OHIP Fact Sheet HIV, PrEP, and You		✓	✓		✓		✓		✓	✓			
65.	OHIP Fact Sheet Asthma Control and You		✓	✓		✓		✓		✓	✓			
66.	OHIP Fact Sheet High Blood Pressure, Prevention, and You		✓	✓		✓		✓		✓	✓			

67.	OHIP Fact Sheet Medicaid Telehealth Services During the Coronavirus Emergency - May 2020		✓	✓		✓		✓		✓	✓			
68.	OHIP Fact Sheet Sickle Cell Disease	✓	✓	✓		✓	✓	✓		✓	✓		✓	
69.	OHIP Fact Sheet Smoking Cessation	✓	✓	✓		✓	✓	✓		✓	✓		✓	
70.	OHIP Fact Sheet Kidney Disease	✓	✓	✓		✓	✓	✓		✓	✓		✓	
*71.	OHIP Fact Sheet Covid Testing and Treatment	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
72.	OHIP Fact Sheet Periodontal Disease	✓	✓	✓		✓	✓	✓		✓	✓		✓	
73.	OHIP Fact Sheet Tooth Decay	✓	✓	✓		✓	✓	✓		✓	✓		✓	
*74.	NYS Donate Life Registry Enrollment Form		✓	✓	✓	✓		✓		✓	✓			
*75.	NYS Donate Life Registry Change and Modification Form		✓	✓	✓	✓		✓		✓	✓			
*76.	NYS Donate Life Registry Removal Form		✓	✓	✓	✓		✓		✓	✓			
*77.	WIC – No Longer Eligible Letter Certification Letter	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi
*78.	WIC - Re-Certification Letter	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi
*79.	WIC - Temporary 30-Day Benefit Letter	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi
*80.	WIC - Thank You Letter	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Hindi
*81.	NYS WIC Acceptable Foods Card	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Farsi, Hindi, Karen, Nepali, Somali, Turkish, Vietnamese
*82.	WIC Fair Hearing Request Form - DOH-5249	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Farsi, Hindi, Karen, Nepali, Somali, Turkish, Vietnamese
*83.	WIC Self Declaration Form - DOH-5284	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Farsi, Hindi, Karen, Nepali, Somali, Turkish, Vietnamese
*84.	What to Bring to Your WIC Appointment Brochure - DOH-19044	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Burmese, Farsi, Hindi, Karen, Nepali, Somali, Turkish

*85.	Infant Meal Pattern (1260)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
*86.	Child Meal Pattern (1259)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
*87.	Adult Meal Pattern (1258)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
*88.	Crediting Foods in CACFP (19148)			✓		✓	✓	✓		✓	✓			
*89.	Good Nutrition Pays (4359) (for Day Care Centers)										✓			
*90.	Good Nutrition Pays (4364) (for Day Care Homes)			✓						✓	✓			
*91.	Letter to Households (CACFP- 3673)	✓		✓		✓	✓	✓		✓	✓			
*92.	Income Eligibility Form for Child Care - DOH 3688	✓		✓		✓	✓	✓		✓	✓			
*93.	Adult Care Income Eligibility Application - DOH 3834			✓						✓	✓			
94.	Asthma Action Plan (Publication 4850)													
*95.	Consent for Cancer Services Program Participation	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
*96.	Expect The Test - Poster	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Uzbek
97.	Maternity Information Leaflet - DOH-2901			✓		✓	✓	✓		✓	✓			
*98.	Pregnancy Complications - DOH-2943	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
99.	Gestational Surrogacy Fact Sheet													
100.	Surrogates' Bill of Rights													
*101.	Sexual Assault Victim Bill of Rights	✓	✓	✓		✓	✓	✓		✓	✓		✓	
*102.	Can your baby hear you? Brochure	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Japanese
*103.	Your baby passed the hearing screening- Brochure	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		Japanese

*104.	Your baby needs another screening- Brochure	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Japanese
*105.	Child Insurance Information – Form B, Instructions, Parent Notice Regarding Insurance and Authorization to Release Health Insurance Information, Form C	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
106.	Early Help Makes a Difference Brochure	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	Croatian, German, Greek, Hebrew, Hindi, Hmong
*107.	Alternative Format Notice - DOH-5130	✓	✓	✓		✓	✓	✓	✓	✓	✓	I	✓	
*108.	Medicare Savings Program Application - DOH-4328	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
*109.	Authorization for Verification of Resources (Applicant) - DOH-5148	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
*110.	Authorization for Verification of Resources (Legal Spouse) - DOH-5149	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
*111.	Recertification for Medical Assistant - DOH-4411	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
*112.	Disability Questionnaire - DOH-5139	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
*113.	Authorization for Release of Health Information Pursuant to HIPPA - DOH-5173	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
*114.	Description of Child's Activities - DOH-5153	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
*115.	Consent Release of MA Information - DOH-5174	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	
116.	Just Say Yes Farmers' Markets participant survey_EARS only		✓	✓							✓			Simplified Chinese
117.	Just Say Yes Farmers' Markets participant survey_Expanded	✓	✓	✓						✓	✓			Ukrainian
118.	Just Say Yes participant survey	✓	□	□						✓	✓			Ukrainian

119.	Just Say Yes Informed Consent-Participant Demographic and Evaluation Survey	✓	☐	☐							✓	✓			Ukrainian
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French and Urdu vital document translations will be completed by July 2023. New documents identified for translation after the signing of this Plan and before the 2-year reassessment will be translated in a timely manner.

The process for ensuring that translations are accurate and incorporate commonly used words is as follows:

The Department, through its vendor (where applicable), will ensure that proofing/editing for correctness and cultural sensitivity are a component of the translation services provided by any vendor under contract as part of the publication process. The Department will also ensure that plain language is used in materials produced before submitting for translation to ensure information is accessible to a range of reading and health literacy levels.



PART 5 – Staff Training

The person in the agency who is responsible for training staff in language access services is:
The Division of Administration Training Director and the NYS DOH Language Access Coordinator.

The staff training includes the following components:

- The agency’s legal obligations to provide language access services
- The agency’s resources for providing language access services
- How to access and work with interpreters
- Cultural competence and cultural sensitivity
- How to obtain translation services
- Maintaining records of language access services provided to LEP individuals

The methods and frequency of training are as follows:

Mandatory online training will be provided for all employees within 90 days of being hired and annually thereafter. Staff will have to complete the Office of Employee Relation’s Language Access Training and the Department’s agency specific Language Access Plan training. On and after September 30, 2014, employees newly assigned to functions that bring them into contact with the public must complete the computer-based training within 90 days of assignment to the

program. As changes occur in the program, the training will be updated, designated program liaisons will be informed of changes to communicate to relevant staff and updates will be posted on the Department's News Site.



PART 6 – Monitoring the Plan and Responding to Complaints

A. Monitoring

Our agency’s Language Access Coordinator (“LAC”) will monitor implementation of the Plan to make sure we are in compliance. Our protocols in this regard are as follows:

The Department provides onsite education and information via email, conference calls, the Department’s News Site and SharePoint site. Internal controls are developed to ensure accuracy with completion of requests in a timely fashion, review progress, identify gaps and develop work plans to resolve any gaps. Internal and Department wide meetings are determined by priorities set and the plan is updated as needed.

B. Complaints

We provide information to the public in at least the top 12 most commonly spoken non-English languages in the state, advising members of the public of their right to file a complaint if they feel that they have not been provided adequate language access services or have been denied access to services because of their limited English proficiency. We do not retaliate or take other adverse action because an individual has filed a language access complaint.

We display information on the right to file a complaint, and the procedures for filing a complaint, in the following manner:

In addition to its website, the Department requires that all programs identified by the Department as providing direct public services place notifications in reception areas indicating the availability of a complaint form in the languages indicated in Part 2. The Department utilizes the Statewide Language Access Complaint Form that provides information on the right to file a complaint and procedures to do so. The complaint form is available in the languages described in Part 2 and is found on the Department website for download or online submission, and internally on the NYS DOH SharePoint site. It is also available at NYS Department of Health COVID-19 Vaccination Points of Distribution sites. Additionally, the Department requires that hospitals in the State adopt and make available the "Patient's Bill of Rights" available in Arabic, English, Spanish, Italian, Russian, Greek, Yiddish, Haitian Creole, Korean and Chinese. The following are inserts from the Patient's Bill of Rights:

As a patient in a hospital in New York State, you have the right, consistent with law, to: Understand and use these rights. If for any reason you do not understand, or you need help, the hospital MUST provide assistance, including an interpreter.

Receive treatment without discrimination as to race, color, religion, sex, national origin, disability, sexual orientation, source of payment, or age.

Complain without fear of reprisals about the care and services you are receiving and to have the hospital respond to you and if you request it, a written response. If you are not satisfied with the hospital's response, you can complain to the New York State Health Department. The hospital must provide you with the State Health Department's telephone number.

We handle complaints made to the agency regarding the provision of language assistance services in the following manner:

Program staff will respond to complaints received regarding the provisions of language assistance services and submit to the Department LAC via email, complaint form or phone call. The LAC will address complaints received that cannot be resolved by program staff.

All complaints must be timely forwarded to the Office of Language Access.

PART 7 – Signatures



Krista M. Proud

Acting Executive Deputy Commissioner 9/29/22

Head of Agency **Title** **Date**

Wilma Alvarado-Little **Associate Commissioner** **09/19/2022**

Agency LAC **Title** **Date**

J. Janos

Executive Director, NYS Office of Language Access

09/29/2022
Date