

**SONOMA DEVELOPMENTAL CENTER
ADMINISTRATIVE DIRECTIVE
SECTION 400 CLIENT SERVICES**

LANGUAGE ASSISTANCE SERVICES

430

- Effective: March 2016
- Review by: Primary Author: Quality Assurance Director and Policy Review Committee annually.
- Note: This cancels and replaces SDC Policy 430, dated October 2015.
- Authority: California Department of Public Health, AFL 08-04 Language Assistance Services, February 4, 2008.
AFL 15-27 Assembly Bill (AB) – Hospital Language Assistance Services, December 15, 2015
Dymally-Alatorre Bilingual Services Act, Government Code Section 7290-7299.8.
Title VI of Civil Rights Act of 1964.
Rehabilitation Act of 1973
State of California, Executive Order 13166.
Health and Safety Code, Section 1259
Health and Safety Code, Section 1259(c)(2).
Department of Developmental Services (DDS), Administrative Manual, AD92208.3, Limited English Proficiency Policy, August 26, 2016.
Title 42 Public Health, Part 482 – Requirements for Hospitals
- Reference: Sonoma Developmental Center (SDC) Policies
415 Rights Assurance Program
431 Admission to Sonoma Developmental Center
432 The Interdisciplinary Team Process
Health and Human Services Agency
DS 6022 Language Access Complaint Form
- Attachment: Department of Developmental Services
Language Access Complaint Process

POLICY

When language or communication barriers exist between patients and the staff arrangements shall be made for interpreters or bilingual professional staff to ensure adequate and speedy communication between residents and staff.

Sonoma Developmental Center (SDC) will provide equal access to departments, programs and services to persons with Limited English Proficiency (LEP) and other communication barriers. SDC will ensure access to information for limited English speaking, non-English speaking and hard of hearing and deaf individuals residing at SDC and their families through a provision of translators and /or interpreters.

DEFINITIONS:

- **Translator:** A bilingual person able to understand the non-English language and translate the written communication into English. This person may be an employee, family member, friend, or volunteer.

- **“Interpreter”** means: a person fluent in English and in the necessary second language, who can accurately speak, read, and readily interpret the necessary second language, or a person who can accurately sign and read sign language. Interpreters shall have the ability to translate the names of body parts and to describe competently symptoms and injuries in both languages. Interpreters may include members of the medical or professional staff.
 - **Certified Translator/Interpreter:** A person who has taken and passed a test that demonstrates their ability to interpret and/or translate.
 - **“Language or communication barriers”** means:
 1. With respect to spoken language, barriers that are experienced by individuals who are limited-English-speaking or non-English-speaking individuals who speak the same primary language and who comprise at least 5 percent of the population of the geographical area served by the hospital or of the actual patient population of the hospital. In cases of dispute, the state department shall determine, based on objective data, whether the 5 percent population standard applies to a given hospital.
 2. With respect to sign language, barriers that are experienced by individuals who are deaf and whose primary language is sign language.
- 1.0 Whenever a language or communication barrier exists that impedes understanding of health care information or services, a translator or interpreter will be called in to assist. The need for assistance can be determined by any member of the individual’s Interdisciplinary Team.
- 1.1 The residents whose primary language is ASL will be provided with staff with ASL skills which will allow them to fully participate in all aspects of daily living.
- 2.0 Human Resources will maintain a list of bilingual employees and certified interpreters who may be called upon to provide with translation or with interpreting for non-English speaking or hard of hearing or deaf individuals and/or their families.
- 2.1 Prepare and maintain as needed a list of interpreters who have been identified as proficient in sign language and in the languages of the population of the geographical area serviced who have the ability to translate the names of body parts, injuries, and symptoms.
- 2.2 SDC will annually transmit to the Department of Public Health a copy of its updated policy and to include a description of its efforts to ensure adequate and speedy communication between residents with language or communication barriers and staff.
- 2.3 SDC will make this policy available to the public by posting the most up to date version on its Internet Web site.
- 2.4 SDC will develop and post in conspicuous locations, notices that:

2.4.1 Advise residents and their families of the availability of interpreters

2.4.2 The procedure to obtain language/American Sign Language (ASL) services needs to be written. Currently CPS provides ASL services and JJ Fernandez, Assistant to the Executive Director, through the dispatch operators can get spoken language supports.

2.4.3 For complaints concerning interpreter service problems, including, but not limited to, a T.D.D. number for the hearing impaired please see DS 6022 (Language Access Complaint Form), which is posted on the SDC Intranet.

The notices shall be posted, at a minimum, in the admitting area entrance of the General Acute Care, the Outpatient Clinics, and other service areas as deemed appropriate.

Notices shall inform residents that interpreter services are available upon request:

- Shall list the languages for which interpreter services are available.
- Shall instruct patients to direct complaints regarding interpreter services to the state department.
- Shall provide the local address and telephone number of the state department, including, but not limited to, a T.D.D. number for the hearing impaired. (See Attachment 1)

Identify and record a resident's primary language and dialect on one or more of the following: Patient medical chart, hospital bracelet, bedside notice, or nursing card.

Notify employees of the hospital's commitment to provide interpreters to all residents who request them.

Review all standardized written forms, waivers, documents, and informational material available to patients upon admission to determine which to translate into languages other than English.


EXECUTIVE DIRECTOR

Language Access Complaint Process

**You have the right
to an interpreter.**



Usted tiene el derecho a un intérprete.

It is the policy of the Department of Developmental Services (DDS) to provide the public equal access to information about its programs and provision of services. DDS strives to reduce and/or eliminate any language barriers for persons who are non-English speaking or who have limited English proficiency. In accordance with the Dymally-Alatorre Bilingual Services Act and Title VI of Civil Rights Act of 1964, DDS provides verbal interpretation and translation of written materials regarding the DDS service delivery system in the languages that meet a 5 percent threshold of the persons served, as well as many of other non-threshold languages as possible by utilizing certified bilingual DDS staff or contracted services.

However, in the instances people that are not satisfied with the bilingual services received during their interactions with the Department, they may utilize the DDS Language Access Complaint Process form (DS 6022 - [English](#) | [Spanish](#)).

Complaints regarding DDS interpreter and translation services should be directed to:

Department of Developmental Services
Office of Human Rights and Advocacy Services
Attention: Bilingual Services Coordinator
1600 Ninth Street, Room 240 (MS 2-15)
Sacramento, CA 95814

Phone: (916) 654-1888
TTY/TDD: (916) 654-2054 Fax: (916) 651-8210
Email: OHRAS@dds.ca.gov