

# Public Health Division Language Access Plan

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Wyoming  
Department  
of Health

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## Introduction and Purpose

Wyoming foreign-born residents account for 3.1% of the state’s population per 2019 Census estimates.<sup>1</sup> In five counties, the foreign-born population is higher than the state proportion. Those counties include: Sublette (4.4%), Sweetwater (4.7%), Carbon (5.4%), Albany (7.3%), and Teton (11.8%).

In Wyoming, 6.6% of residents speak a language other than English at home, with Spanish being spoken by 4.3% of the Wyoming population.<sup>1</sup> Further, Census data indicates that 4.8% of Wyomingites experience hearing difficulties, and 2.7% experience vision difficulties.<sup>1</sup>

The Wyoming Department of Health (WDH), Public Health Division (PHD), Health Equity Workgroup (HEW) prepared this Language Access Plan (LAP) for the purposes of defining the protocol and procedures taken by PHD staff to ensure meaningful and universal access to PHD services, programs, and activities on the part of persons who self-identify as Limited English proficiency (LEP), are Deaf or Hard-of-Hearing, are blind or have low vision, or have a preference for materials and services in a language other than English.

PHD defines a LEP person as someone who is not able to speak, write, or understand the English language at a level that allows them to interact effectively with PHD programs. A client maintains the right to self-identify as a LEP person, as well as the right to indicate their language of preference, particularly as it relates to health message delivery. This plan aims to support PHD in offering meaningful access to PHD programs, services, and information in compliance with applicable Federal and State laws.

This document delineates the services, protocols, and procedures required to support language access services for PHD clients. This plan informs PHD staff and designates key personnel tasked with supporting language access services for the benefit of PHD clients. Implementation of this Plan supports PHD staff in adherence to language access protocols and aids PHD in optimally providing services.

Common definitions pertaining to language are included in [Appendix A](#).

## Mission, Vision, and Values

The mission of PHD is to “promote, protect, and improve health and prevent disease and injury in Wyoming.” When PHD is successful in this mission, our vision of “healthy people and communities across Wyoming” will be realized.

PHD is further guided by the WDH values, which include:

1. Values and Integrity
2. Commitment
3. Teamwork

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<sup>1</sup> US Census Wyoming Profile: <https://data.census.gov/cedsci/profile?g=0400000US56>

4. Pride
5. Acceptance of Change
6. Outstanding Customer Service
7. Open and Honest Communication
8. Conflict Resolution
9. Celebrations to Support Values
10. Concern for People

Language access is an important component of delivering public health services in alignment with our mission, vision, and values.

### Language Access Services and Protocols

PHD services must be accessible to all residents of the State, including those with limited English proficiency (LEP) or with hearing or vision impairments. Implementation of this Plan supports PHD staff in adherence to language access protocols and aids PHD in optimally providing services.

#### Services

The PHD currently contracts with Vendor name Linguistic Services for the (enter year) Fiscal Years. A summary of services and other resources are listed in the below table.

Service Type	Description
Translation 	Translation is when someone converts a written text to another language, in writing. Translation services are available through the <i>Vendor Name</i> contract.
Interpretation 	<p>Interpretation is when someone converts an oral or signed message from one language to another. It is spoken or signed.</p> <p>Pre-scheduled or on-demand interpretation through Vendor name can be done via video or telephone.</p> <p>The Wyoming State Language Access Network (WYNSLA) is a community of legal and healthcare professionals, law enforcement, trained interpreters and translators, service providers, advocates, and community members dedicated to language access. Members of this network can provide <i>face-to-face</i> or virtual interpretation services as well. To access a list of WYNSLA members, click <a href="#">here</a>.</p>

#### Protocols

The Office of Performance Improvement and Health Equity facilitates the execution and management of the language access services contract with a third-party vendor using pooled funding resources across PHD and other WDH programs. Language access services provided through a vendor or a contract will be charged to the requesting program.

Each program should project their language expenses and allocate the needed funds at the start of each biennium. If a program does not contribute to the contract, it will be harder to guarantee translation and interpretation service needs are met. However, the program should contact [Holly Scheer](#) so they can work with the provider to determine other billing options available.

The below table outlines the key protocols to access services.

**An important note before you get started:** Commonly, LEP and ASL clients will have a family member or friend accompany them to interpret. The use of a family member or friend for interpretation should not be used unless specifically requested by the LEP or ASL individual after they have been informed and understands that they have a right to an interpreter at no cost to them. **Under no circumstances may a minor child be used for interpretation.** If an individual wishes to refuse or waive medical interpretation, document their refusal using the form in [Appendix C](#). If the interpretation is not being completed in-person, the waiver should be discussed verbally and refusal/waiver should be documented through the form Appendix C. If it is not possible to get a signed waiver form, the program or disease case investigator may obtain a verbal waiver and document it in the client's file.

Service Type	Protocol to Access Service
Translation	<p><u>Vendor name</u> (see rates <a href="#">insert link here</a>)</p> <ul style="list-style-type: none"> <li>• Download the <a href="#">request form</a>.</li> <li>• Complete form.</li> <li>• Submit form and source files as detailed on the request form.</li> </ul> <p><u>WYNLSA</u> (rates will vary by WYNLSA member providing service)</p> <ul style="list-style-type: none"> <li>• Access the list of WYNLSA members <a href="#">here</a>.</li> <li>• Contact members who provide translation services to get their rates.</li> <li>• Follow the translator's instructions to request and pay for services. (Selected translator will need to be a State of Wyoming <a href="#">vendor</a> to render payment.)</li> </ul>
Interpretation <sup>2</sup>	<p><u>General</u></p> <ul style="list-style-type: none"> <li>• When assisting a LEP walk-in or appointment client, use the "<a href="#">I Speak</a>" card to determine the language needed for interpretation services.</li> <li>• Offices must print and display the "I Speak" card for members of the public. When an "I Speak" card is chosen, the person assisting the client proceeds to contact an interpreter via telephone (see Telephonic Interpretation below).</li> </ul> <p><u>Vendor name</u> (insert link here; telephonic services available 24/7/365; video services available in Spanish 24/7/365)</p>

<sup>2</sup> In order to ensure that HIPAA requirements are satisfied, please contact the Department's Office of Privacy, Security, and Contracts (OPSC) prior to utilizing any language access services from providers other than the pre-approved vendor, Vendor name .

- *Telephonic<sup>3,4</sup> for an in-person client*
  - After determining the language needed, dial **(insert vendor number insert link here)** to access telephonic interpretation services.
  - When an operator answers, you will need to be prepared to give them your customer code (provide appendix insert link insert link here), first and last name, county (for WIC and PHN offices only), and language needed.
- *Telephonic for a client who calls you or who you have called*
  - If the client calls you, you will follow the above instructions for in-person clients so the service can be conferenced in through a three-way call.
  - If you are calling the client, you can contact the client to make sure they are available and then conference in the service, OR you might contact the service first to reach an interpreter, and then conference in the client.
  - More details on accessing all telephonic interpretation services are found [insert link here](#).
- *Video-based<sup>5</sup> interpretation*
  - Full, detailed instructions for ensuring proper set-up and readiness for video-based interpretation can be found [insert link here](#), and network and Internet requirements can be found [insert link here](#). The following steps are a summary.
    - Complete initial computer set-up (do this in advance so your computer is equipped).
    - Register in the Video Remote Interpreting (VRI) portal.
    - Test a video call.

WYNLSLA (rates will vary by WYNLSLA member providing service)

- *Face-to-face<sup>6,7</sup> interpretation*
  - Access a list of WYNLSLA members [here](#) to locate interpreters for face-to-face interactions.
  - Ensure a business associate agreement (BAA) is established with the selected interpreter if protected health information (PHI) will be communicated as a part of the interaction(s). (BAA templates can be found [insert link here](#)).

<sup>3</sup> Telephonic interpretation services are best for on-demand interactions, or for exchanges that are anticipated to be brief (15 minutes or less) and not complex.

<sup>4</sup> The current agreement only covers on-demand telephonic and video interpretation services. If pre-scheduled services are needed, different rates and cancellation fees will apply. Such requests will need to be approved in advance by the Office of Performance Improvement and Health Equity.

<sup>5</sup> Video-based interpretation is also ideal for American Sign Language interpretation. WYNLSLA members and the [Wyoming Department of Workforce Services Relay Program](#) also offer ASL interpretation services.

<sup>6</sup> Face-to-face interpretation is the ideal method for communicating with a client for an appointment or for more complex interactions with a client. In-person interpretation should be scheduled in advance to allow time for the program to coordinate with interpreters to be available during the scheduled appointment.

<sup>7</sup> Due to COVID-19, the use of in-person interpretation services may be restricted or more challenging to complete. WYNLSLA members may be available to offer services through telephonic or video-based means if necessary, but Vendor name services should be used to the extent possible as a first option for those types of services.

	<ul style="list-style-type: none"> <li>○ Arrange and pay for necessary in-person interpretation services. (Selected interpreter will need to be a State of Wyoming <a href="#">vendor</a> to render payment.)</li> </ul>
Relay Services	<p><a href="#">Wyoming Relay</a> is a free service that allows people who are Deaf, Hard-of-Hearing, Deaf-blind and/or have a speech disability to place and receive telephone calls 24/7/365. Individuals needing this service will follow the below instructions to be connected to a Communication Assistant.</p> <ul style="list-style-type: none"> <li>● Dial 711 (or the Wyoming Relay <a href="#">toll-free number</a> appropriate for their specific call).</li> <li>● A specially trained Communications Assistant (CA) will answer and identify themselves by their CA number.</li> <li>● Individuals will give the Communications Assistant the phone number of the person they are calling.</li> <li>● The Communications Assistant will connect them with the person they are calling and assist them with communication.</li> </ul>

## Interpretation Guidelines

To ensure quality interpretation follow these steps:

- 1) Advertise the availability of this service to clients via emails, newsletters, public campaigns (as necessary), signage, and website (ensure website can be viewed in alternate languages).
- 2) Anticipate the frequency, duration of time, and funding that will be needed to meet with an LEP client(s) to determine whether in-person, telephonic, or ASL interpretation is most appropriate and feasible.
- 3) Contact interpreters prior to the appointment to confirm their attendance on the right date, and at the right time and location (virtual or in-person). Discuss any cultural considerations with the interpreter in preparation for the appointment.
- 4) If using a vendor other than Vendor name :
  - a. Obtain the interpreter's proof of formal training or certification in advance of the appointment.
  - b. Ensure a business associate agreement (BAA) is established with the selected interpreter if protected health information (PHI) will be communicated as a part of the interaction(s). (BAA templates can be found [here](#)).
  - c. Ensure the interpreter is established as a State of Wyoming [vendor](#).
- 5) Speak slowly and clearly during the interaction with the patient, allowing plenty of time for interpretation. Speak to the client, not the interpreter. Using visuals is also recommended if available.
- 6) Ask that the client repeat back to you (through the interpreter) what they understood to ensure the communication is effective.
- 7) Record the name of the interpreter and the service provider in the client's file.
- 8) Report both highly satisfactory experiences and negative experiences with an interpretation service to the Office of Performance Improvement and Health Equity at

307-777-8946 or by emailing [Holly Scheer](#) so that appropriate action can be taken to address concerns.

## Translation Guidelines

To ensure quality translation follow these steps:

Prior to submitting a document for translation:

- 1) Determine the target audiences' language(s) and literacy level. The ideal literacy level for health-related documents is 3<sup>rd</sup> to 5<sup>th</sup> grade, with the highest allowable at the 8<sup>th</sup> grade level. Microsoft Word contains readability statistics to determine the grade level of the written document.
- 2) Verify that your finalized document in English is clear, accurate, free of errors, and in Word, Excel, PowerPoint, or Google format whenever possible (PDF documents must be converted first which costs more and may not convert back properly).
- 3) Contact a translator to request a quote that includes timelines, independent review, and an included font file. Provide a list of relevant acronyms and definitions of technical terms to the translator if there are any used in the document.
- 4) Discuss all of the details of the translation project with the translator. Request that the translated document include a citation to the original English document and the language it was translated into in English so that it can be identified by employees. Ask that the translator's name and company be included in the final document.
- 5) If using a vendor other than Vendor name :
  - a. Ensure the translator is established as a State of Wyoming vendor.

Quality assurance during and after translation:

- 1) Document all correspondence with the translation provider, including the names of translators and reviewers for future reference.
- 2) Maintain open communication to clearly communicate your expectations and requests.
- 3) Upon receiving the completed translation, verify that the font file is included, that the original is cited, that an independent review was done (if requested/available), and that the translator's name/organization is included on the document.

## Supportive Training

**Supportive Training and Quality Assurance Mechanisms.** PHD programs can access training resources related to language access on [insert link here](#) regarding the following:

- Laws and Regulations Regarding Language Access Services (LAS);
- Language Assistance Services - Spring 2019;
- Civil Rights and Language Access Plan - Spring 2019;
- Beyond LEP: Effectively Communicating with Individuals with Disabilities - Spring 2019;
- Avaya Phone Desk Reference Guide (call holds, transfers, and conferencing); and

- One-on-one training can be requested by contacting the Office of Performance Improvement and Health Equity.

## Federal Laws Pertaining to Language Access

The goal of this plan is to assure compliance with federal laws pertaining to language access, including those defined below.

- [Title VI of the 1964 Civil Rights Act](#). This act stipulates that no person in the United States shall, on the ground of race, color, or national origin be excluded from participation in, denied benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.
- [Executive Order 13166-Improving Access to Services for Persons with Limited English Proficiency](#). On August 11, 2000, the President signed Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency." The Executive Order requires Federal agencies to examine the services they provide, identify any need for services to those with Limited English Proficiency (LEP), and develop and implement a system to provide those services so LEP persons can have meaningful access to them. The Executive Order also requires that the Federal agencies work to ensure that recipients of Federal financial assistance provide meaningful access to their LEP applicants and beneficiaries. To assist Federal agencies in carrying out these responsibilities, the U.S. Department of Justice has issued policy guidance on the enforcement of Title VI of the Civil Rights Act of 1964 (see [Enforcement of Title VI of the Civil Rights Act of 1964-National Origin Discrimination Against Persons With Limited English Proficiency; Policy Guidance](#) and [Federal Register / Vol. 67, No. 117 / Tuesday, June 18, 2002 / Notices](#)).
- [Section 504 of the Rehabilitation Act of 1973](#). This act was the first disability civil rights law to be enacted in the United States. It prohibits discrimination against people with disabilities in programs that receive federal financial assistance and set the stage for enactment of the Americans with Disabilities Act (ADA). Section 504 works together with the ADA and Individuals with Disabilities Education Act (IDEA) to protect children and adults with disabilities from exclusion, and unequal treatment in schools, jobs, and the community.
- [American with Disabilities Act \(ADA\)](#). This act requires that Title II entities (State and local governments) and Title III entities (businesses and nonprofit organizations that serve the public) communicate effectively with people who have communication disabilities. The goal is to ensure that communication with people with these disabilities is equally effective as communication with people without disabilities.
- [Section 1557 of the Affordable Care Act](#). This section prohibits discrimination on the grounds of race, color, national origin, sex, age, or disability in certain health programs and activities. Section 1557 further mandates covered entities take reasonable steps to provide meaningful access for individuals with limited English proficiency.

The PHD Language Access Plan shall be fully implemented subject to the availability of fiscal resources to implement said language access plan. This plan represents PHD's administrative

blueprint to provide meaningful access to public health services, programs, and activities on the part of LEP individuals.

## Language and Disability Makeup of Wyoming Population

An identification of languages in Wyoming will assist with the needs for services in languages other than English as well as those who indicate a need for sign-based interpretation such as ASL. The Wyoming language data gives PHD a baseline understanding of language accessibility needs in the state.

Wyoming foreign-born residents account for 3.1% of the state’s population per 2019 Census estimates.<sup>8</sup> In five counties, the foreign-born population is higher than the state proportion. Those counties include: Sublette (4.4%), Sweetwater (4.7%), Carbon (5.4%), Albany (7.3%), and Teton (11.8%).

In Wyoming, 6.6% of residents speak a language other than English at home, with Spanish being spoken by 4.3% of the Wyoming population.<sup>1</sup> Further, Census data indicates that 4.8% of Wyomingites experience hearing difficulties, and 2.7% experience vision difficulties.<sup>1</sup>

The table below presents the top ten languages spoken in Wyoming.<sup>9</sup>

<b>Top Ten Languages Spoken in Wyoming By Census 2000</b>	<b>Top Ten Languages Spoken in Wyoming By Census 2005</b>	<b>Top Ten Languages Spoken in Wyoming By Census 2010</b>
English 93.78%	English 93.95%	English 93.39%
Spanish 4.03%	Spanish 4.00%	Spanish 4.47%
German 0.52%	German 0.46%	German 0.35%
French 0.35%	French 0.25%	French 0.28%
Arapaho 0.20%	American Indian 0.18%	Algonquian 0.18%
Japanese 0.11%	Greek 0.15%	Russian 0.10%
Shoshoni 0.10%	Algonquian 0.15%	Tagalog 0.09%
Chinese 0.09%	Tagalog 0.14%	Greek 0.09%
Italian 0.08%	Dakota 0.10 %	Dakota 0.08%
Tagalog 0.07%	Swedish 0.08%	Chinese 0.08%
Korean 0.07%	Finnish 0.07%	Japanese 0.06%

The top three languages that represent direct need for services and accessibility in Wyoming, from the 2010 Census, are noted below.

<sup>8</sup> US Census Wyoming Profile: <https://data.census.gov/cedsci/profile?g=0400000US56>

<sup>9</sup> MLA Language Map Data Center: [https://apps.mla.org/map\\_data](https://apps.mla.org/map_data)

LANGUAGE	TOTAL (Ages 5+)
Spanish	22,722
German	1,771
French	1,434

The 2019 Census estimates<sup>10</sup> show broader categories of languages spoken as follows:

LANGUAGE	TOTAL (Ages 5+)
Spanish	27,394
Other Indo-European Languages	5,454
Asian and Pacific Islander Languages	3,758
Other Languages	3,647

### Agency Monitoring

One of the primary elements of an effective and appropriate language access plan is monitoring of the plan. On an annual basis, the Division will:

- Assess the LEP demographics of WY and update the numbers in this plan;
- Assess staff knowledge and implementation capacity with regard to language access policies and procedures;
- Assess viability of language access provisions and include in this plan as needed; and
- Evaluate the costs of services, and identify cost-savings options.

### Quality Assurance Strategy

Additional verification of accuracy and quality is not expected at the Division level. Proof of training is requested for interpreters and independent reviews are requested for translation.

If a program would like a document to be reviewed internally, that is allowable assuming the following conditions are recognized:

- **Peer reviewers focus on two areas: errors and context barriers.** The reviewer’s task is to correct mistakes and to point out contextual barriers by offering constructive feedback and suggestions for improvement. Reviewers should not concentrate on style. Ask yourself: is this really an issue or is it a matter of taste?
- **Peer reviewers are required to be native speakers.** Please consider regional differences of the language. For example, Spanish varies greatly among countries and

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<sup>10</sup> Census American Community Survey, 2019:  
<https://data.census.gov/cedsci/table?t=Language%20Spoken%20at%20Home&g=0400000US56&tid=ACSDP5Y2019.DP02&hidePreview=true>

regions. Before deciding that a word or expression is incorrect, double check to make sure that word is in fact incorrect and not a word that sounds foreign only because you are not accustomed to using it. Remember that our audience comprises a variety of speakers from different countries and regions. Therefore, we must make a conscious effort to include those variations in our translations.

- **Maintain integrity of English text regarding tone and reading level.** Most materials are written at an accessible reading level (below 8<sup>th</sup> grade). Make sure the translation maintains the same tone and reading level as the original. Look for words and phrases that the US immigrant population may not understand because of literacy issues.
- **Use track changes and commenting tools to annotate changes.** If your computer doesn't have the capacity for certain alphabets and characters, request the font file. Font files should have been provided when the document was returned to the requestor. If you are reviewing PDF documents, Adobe Acrobat has commenting tools. If you do not have the full version of Adobe, print out the documents and hand mark them. Most translators/translation agencies accept hand-written comments as long as they are legible.

If errors or context barriers are identified in the peer-review process, the program should work with Vendor name to correct the identified issues.

### **Language Access Complaint Procedure**

Quality language access services are a priority for PHD.

For complaints related to Vendor name -provided services, download and complete this [form](#). Return completed form to [Lindsay Mills](#). The form will be emailed to Vendor name . Vendor name will locate the order and investigate your question or concern. Once the investigation is complete, a formal quality assurance (QA) statement that outlines the findings and actions taken will be provided to you. Standard turnaround time to address reported issues is 48–72 hours.

For other language access concerns, contact [Holly Scheer](#) by email or at 307-777-8946.

## Appendix A - Definitions

**Blind or Low Vision:** This refers to an individual with limited sight abilities ranging from some sight to blindness.

**Deaf or Hard-of-Hearing:** This term refers to someone who has full or complete hearing loss. This may be because they were born with hearing loss or they may have lost some or all their hearing later in life.

**Effective Communication:** The Limited English Proficient (LEP) individual can receive information about and understand the services available to them. Furthermore, the individual must be able to communicate their situation to the service provider.

**Interpretation:** The oral or spoken transfer of a message from one language into another.

**Limited English Proficient (LEP):** A person who is not able to speak, read, write, or understand the English language well enough to allow them to interact effectively with service providers.

**Meaningful Access:** The standard of access required for federally funded entities to comply with Title VI's language access requirements, which includes the availability of free language assistance that results in accurate and effective communication.

**Office for Civil Rights (OCR):** The civil rights enforcement agency of the U.S. Department of Health and Human Services. OCR Region 8 is the regional office that enforces Title VI in Wyoming for health and human services agencies and providers.

**Primary Language:** Primary language is the language other than English that is most commonly spoken by 5% or more persons in the service area of the agency as determined by the research process.

**Relay Services:** Relay services for deaf and hard-of-hearing people enable them to communicate with hearing people and vice versa. This communication takes place through a variety of platforms: text relays through instant messaging, websites, TTYs, or video relays through videophones.

**Translation:** The written transfer of a message from one language into another language.



Appendix C - Waiver of Interpreter Services



**WAIVER OF INTERPRETER SERVICES**

The Insert company/agency name here believes having a trained medical interpreter provides you the greatest benefit to accessing program services. The trained medical interpreter understands your language and Insert type (medical, educational, court or social service) terminology, and is also trained to protect your privacy. This service is free to you.

Having a trained interpreter gives you many benefits that might not be achieved if a friend or family member interprets for you.

- The interpreter can use the correct medical word and give you the best information possible;
- The interpreter will not add or leave out information;
- The interpreter will protect your privacy;
- The interpreter will not tell others about your health condition outside of your interaction to receive services; and
- The interpreter will understand what the doctor, nurse, or other caregiver says.

Each of these benefits support you with getting the best possible care and services. We want to make sure you understand the benefits of having a trained interpreter.

+++++

You have explained the benefits to me in my own language. I understand these benefits and still choose not to have a medical interpreter.

\_\_\_\_\_  
Patient's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Program Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Interpreter Signature if present

\_\_\_\_\_  
Date

If interpreted by phone - interpreter name, number, or another identifier:

\_\_\_\_\_