

## AUXILARY AIDS PLAN 2020

Henderson Behavioral Health ensures that communication necessary to access behavioral healthcare services is provided without cost to all Persons Served, their Authorized Representatives, and their Companions who assist them with behavioral healthcare treatment, and who are Deaf, Hard-of- Hearing, or have Limited English Proficiency( LEP).

### The purpose of this plan is:

- To ensure that services are provided to Persons Served without regard to race, color, national origin, disability, or age.
- To ensure compliance with Title VI of the Civil Rights Act, Section 504 of the Rehabilitation Act, and Title II of the American with Disabilities Act.
- To ensure compliance with Department of Children & Families Services contractual requirements.

### **DEFINITIONS:**

**Auxiliary Aids & Services:** effective methods of making aurally delivered materials available to individuals who are deaf or hard-of-hearing, that may include: qualified sign language or oral interpreters, note takers, computer-assisted real time transcription services, written materials, telephone handset amplifiers, assistive listening devices & systems, telephones compatible with hearing aids, closed caption decoders, open & closed captioning, TTY/TDD, video & text displays, video interpreting services

### **Limited English Proficiency:**

An individual of a national origin minority group with limited English proficiency

### **Aid-Essential Communication Situation:**

Importance, length, and complexity of information being conveyed is such that the requested auxiliary aid or service is always provided, for example:

- Determination of Person Served's medical, psychiatric, psychosocial, nutritional, functional history or description of condition, ailment or injury
- Discussion of treatment plans
- Provision of a Person Served's rights, informed consent, or permission for treatment
- Determination and explanation of a Customer's diagnosis or prognosis, and current condition
- Explanation of procedures, tests, treatment options
- Explanation of prescribed medications, dosage, instructions for use, possible side effects or food or drug interactions
- Communication regarding physically and/or mechanically restraining the Person Served
- Provision of discharge planning and discharge instructions
- Provision of mental health evaluations, therapy, counseling and crisis intervention
- Determination of eligibility for public benefits during the intake and review processes
- Investigation by Protective Services involving interviews

## **DEFINITIONS (continued):**

### **Qualified Interpreter/Translator:**

Interpreter/Translator who is able to interpret effectively, accurately and impartially both receptively and expressively, using a necessary specialized vocabulary in providing services for the organization for individuals with Limited English Proficiency.

### **Certified Interpreter/Translator:**

Qualified interpreter/translator who is certified by the National Registry of Interpreters for the Deaf, or other national or state interpreter assessment and certification program to assist with service provision for individuals with Limited English Proficiency.

### **Companion:**

An individual who is deaf or hard-of-hearing and whom the Person Served indicates should communicate with the service provider on their behalf regarding treatment, or is legally authorized to make healthcare or legal decisions on behalf of the Person Served

## **GENERAL CONSIDERATIONS:**

All HBH employees are trained upon hire and annually in identifying communication needs for Persons Served, their Authorized Representatives, and their Companions who assist them with behavioral healthcare treatment and in accessing resources to ensure that effective communication occurs in the provision of services to the Persons Served. The training required is the Services for the Deaf and Hard of Hearing and Auxiliary Aids located on the DCF website.

Training certificates are retained in the employee files. The Support to the Deaf and Hard of Hearing Form is given to each employee and a copy is retained in their personnel record. Human resources staff audit the new employee files to ensure that this signed form, and other required documentation is completed.

Each service location has an Auxiliary Aids binder, identified as Communication Resources. This includes a number of resources to be accessible to staff in the event that a client is requesting services and may not speak English or identified as LEP. This guide includes the following:

- Language Line instructions and Language Identification Flashcards
- Internal and external resources for interpretation services. The external resources used are vetted to ensure that only certified interpreters/translators are used with the proper credentials.
- The DCF reporting instructions, including the Client Assessment and Assessment Aid and Service Record; Client Request for Free Communication Assistance or Waiver; Client Feedback Form; Standards of Etiquette from the DCF Training. These forms are also provided to all employees at general orientation when they receive the training for the first time. These instructions specify that the forms are to be sent to the SPOC.
- Title VI Civil Rights Fact Sheet, also included at general orientation
- Rehabilitation Act, Section 504 and American with Disabilities (ADA) Fact Sheets
- Henderson Behavioral Health's Communication Accessibility Policy that clearly defines all of these procedures. This policy ensures that staff understand when these communication resources are deemed appropriate and how to access them.

All HBH locations have posters stating that interpretation for behavioral healthcare services is provided at no cost in the following three languages: English, Spanish, and Creole.

The Risk Management Coordinator serves as the Section 504 Coordinator and the Single Point of Contact (SPOC) to facilitate the provision of communication assistance for Persons Served, their Authorized

Representatives, and their Companions who assist them with accessing behavioral healthcare treatment. The SPOC/Risk Management Coordinator is responsible for the following tasks as related to the review of this plan and auxiliary aid plan and processes:

- The SPOC is responsible for the monthly HHS Auxiliary Summary Report as required by DCF on the 5<sup>th</sup> of every month.
- The Auxiliary Aid Plan/Communication Resources Manual is updated at the Safety Committee on an annual basis, as facilitated by the SPOC. This includes the review of any cases that may have used translation services or that were problematic. All grievances are reviewed at Quality Improvement Meetings to ensure that Directors are part of this review.
- Policies are reviewed at the Safety Committee, as related to LEP services and presented to QIC if revisions are needed for approval.
- The SPOC/Risk Management Coordinator's Job Description is reviewed annually.

Due to privacy and confidentiality concerns, potential emotional involvement, and other factors that may adversely affect the ability to facilitate communication, a family member, advocate or friend of a Person Served shall not be required or coerced into interpreting or facilitating communication unless the Person Served provided written confirmation that they have been offered other auxiliary aids and s/he has agreed to using these individuals for this purpose.

Qualified and Certified Interpreters/Translators for deaf or hard-of-hearing Persons Served will be provided in a timely manner per the following:

- In an emergency situation that is non-scheduled, no later than two hours
- In a non emergency by the next business day
- For scheduled events, meetings, conferences and training as needed.
- If the interpreter/translator fails to appear for a scheduled appointment, than an interpreter must be made available no later than two hours after the scheduled appointment time

Written translation of vital HBH documents will be provided free of charge to Persons Served who have Limited English Proficiency