MEDICAL EXAMINER’S OFFICE
LANGUAGE ACCESS PLAN & PROTOCOL
2016

1. PURPOSE AND AUTHORITY

A. In Cooperation with the Mayor’s Office, the Medical Examiner’s Office is committed to compliance with Title VI of the Civil Rights Act of 1964, 2 C.S. § 561 et seq. (Act 172 of 2006), and the Philadelphia Home Rule Charter § 8-600 and § A-200, in ensuring meaningful access to City services and programs for individuals with limited English Proficiency (“LEP”).

B. The purpose of this document is to establish an effective plan and protocol for Medical Examiner’s Office personnel to follow when providing services to, or interacting with, individuals who have limited English proficiency (LEP). Following this plan and protocol is essential to the success of our mission to:

- Investigate deaths in Philadelphia efficiently and thoroughly;
- Provide accurate and unbiased reports and testimony;
- Interact compassionately with bereaved families;
- Identify potential interventions to reduce morbidity and mortality through fatality review;
- Facilitate life-enhancing and life-saving organ and tissue transplantation;
- Maintain collegial relationships with government agencies, educational institutions, and other stakeholders; and
- Advance and share the science and practices of death investigation, forensic pathology, forensic toxicology, and bereavement care.

2. GENERAL POLICY

A. The Medical Examiner’s Office recognizes that the population eligible for services includes individuals who are Limited English Proficient (LEP). It is the policy of the Medical Examiner’s Office to ensure meaningful access to LEP individuals. The Medical Examiner’s Office adopts the following policy to ensure that LEP individuals can gain equal access to its services and communicate effectively.

B. It is the City’s policy to grant access to services or programs to every person even when the person has a limited ability to speak, understand, read or write English. The Medical Examiner’s Office intends to take reasonable steps to provide LEP persons with meaningful access to services and programs. The Medical Examiner’s Office seeks to reduce barriers by increasing its capacity to deliver services and benefits to people in their primary language.

C. The Medical Examiner’s Office, rather than the LEP customer, bears the responsibility to provide language-appropriate services, including the following:
1) Staff at the initial point of contact have the specific duty to identify and record language needs.

2) Staff will discourage use of informal interpreters such as family or friends of the person seeking services unless customers state a preference for informal interpretation by a friend or family member due to the personal and confidential nature of the material being discussed.

3) Staff will under no circumstances allow minor children to act as interpreters.

4) Staff may not suggest or require that an LEP customer provide an interpreter in order to receive services.

D. The preferred methods of serving LEP persons at the Medical Examiner’s Office are as follows:

1) Given the confidential and sensitive nature of much of the information that is handled by the Medical Examiner’s Office, staff will most often seek assistance from professional in-person or telephonic interpreters.

2) Available, trained, competent bilingual staff may be used for in-person or telephone interpreting to support other staff under circumstances that do not involve the transfer of confidential or sensitive information.

3) Staff are authorized to access language services to communicate effectively even when such assistance is not requested by the LEP person.

3. LANGUAGE ACCESS COORDINATOR

Gary Sullivan
Administrative Officer
City of Philadelphia Department of Public Health – Medical Examiner’s Office
321 University Avenue, Philadelphia PA, 19104
Direct: (215) 685-7418
gary.sullivan@phila.gov

Director
Sam P. Gulino, MD

4. DIRECT CONTACT WITH LEP INDIVIDUALS

The Medical Examiner’s Office has several points of contact with the public:

1) Forensic Investigators responding to a scene where a death has occurred may interact with the next of kin of the deceased or other witnesses. In such cases, professional in-person or
telephonic interpretation may be logistically impractical or impossible, and the use of informal interpretation may be necessary.

2) Members of the public frequently call or walk into the Medical Examiner’s Office during business hours to inquire about the death of a family member, perform identifications, pick up personal effects, and request copies of reports. In these situations, staff will often use telephonic interpretation.

   a) Because of the sensitive nature of the information being discussed, some LEP customers may feel more comfortable bringing an extended family member or friend to act as an interpreter. When this happens, staff must judge if the situation is appropriate for informal interpretation or if professional interpretation is necessary.

5. LANGUAGE ACCESS SERVICES AND PROTOCOLS

A. INTERPRETATION

1) Services provided

   a) To ensure that the inability to communicate in English does not deprive the public of rights and privileges, the Medical Examiner’s Office will continue to provide an interpreter, at no cost to the resident, for LEP individuals.

   b) Services offered include telephonic interpretation and in person interpretation.

2) Protocols

   a) Interpretation services will be provided when a customer:
      i. Approaches an employee and appears to be asking for help but has difficulty communicating what he or she needs, or
      ii. Requests an interpreter orally or in writing, or
      iii. Points to a language card.

   b) The employee will then access telephonic interpretation or, if appropriate, engage a bilingual staff member who speaks the language being requested.

3) Procedures

   a) If use of a bilingual staff member to provide interpretation is unavailable or deemed inappropriate due to the confidential or sensitive nature of the information being discussed, the employee will:
      i. Use the “One Moment Please” tool to let the LEP individual know that the employee will be back with him or her in a moment

         ii. Contact a telephonic interpreter with Language Services Associates as follows:
(1) Dial 1-800-305-9673
(2) Press option 2 when prompted
(3) Provide the employee’s first and last name, department and division name, account code, and language needed

It is uncommon for Medical Examiner’s Office staff to know in advance that in-person interpretation will be needed. However, if an LEP person requests in-person interpretation for a future meeting, the process for requesting an in-person interpreter is as follows:

ii. Click on Client Login and sign in using the department’s username and password
iii. Click on Face-to-Face Interpreting
iv. Click on Create New Request
v. Complete the service request form and click Continue
vi. Verify that all information is correct and click Submit Request

4) Future plans

a) The Medical Examiner’s Office will conduct regular trainings to reinforce to employees the need to be sensitive to the needs of our LEP customers and the procedures by which they can access interpretation services. In addition, these trainings will provide employees with guidelines to help them distinguish circumstances when informal interpretation is appropriate from circumstances in which professional interpretation is needed.

B. TRANSLATION

1) Services provided

a) To ensure that the inability to communicate in English does not deprive the public of rights and privileges, the Medical Examiner's Office will continue to provide translation of our general informational leaflet for LEP individuals.

2) Protocols for Document Translation

a) The Medical Examiner’s Office has a general informational leaflet that outlines the general process our customers can expect after a family member has died and the list of services that the Medical Examiner’s Office can provide. The leaflets are prominently displayed in our building’s lobby and are currently available in Arabic, Cambodian, Chinese, English, French, Polish, Russian, Spanish, and Vietnamese.

3) Procedure for submitting a document for translation

a) Before submitting a document for translation, the document will be reviewed to ensure the following:
   i. The content has not already been translated by another document.
   ii. The document and translation procedure have been approved by the Chief
Medical Examiner.

iii. The document is in a format that can be edited (e.g. MS Word, Publisher, InDesign, etc.)

iv. Terms that are not to be translated are highlighted.

v. The document is written so it can be understood by readers with lower literacy skills.

vi. If the translation is a continuation of a series or collection of documents, the same vendor should be requested in order to keep the translation consistent.

b) Once the document is ready for submission, the following procedure is followed:

i. The editable document is emailed to the Office of Immigrant Affairs – Language Access Program Manager at orlando.almonte@phila.gov

ii. OIA will submit the translation request to translation vendor to obtain a quote.

iii. OIA will email a quote with a time estimate for delivery of the translation.

iv. Quote must be authorized by person with authority, signed, and emailed back to OIA.

v. OIA will email the translated documents.

4) Signage

a) The signs displaying the translated general informational leaflets in the Medical Examiner’s Office lobby have been translated into the respective languages.

5) Website

a) The Medical Examiner’s Office website, which is part of the Department of Health’s website, is currently in English only.

b) The Health Department’s website provides instructions in multiple languages instructing LEP customers to call 311 to ask questions and get information in their own language.

6) Future plans

a) The Medical Examiner’s Office will make its records request forms available in multiple languages.

b) The Medical Examiner’s Office will review whether additional translated signage should be used in the office lobby.

c) The Medical Examiner’s Office will review whether portions of its website should be translated and/or if our multi-language general informational leaflets should be made available online.

C. BILINGUAL STAFF

1) Current staff
a) This list identifies the languages spoken by the Medical Examiner’s Office staff who are linguistically, culturally, and technically able to deliver services in a language other than English and/or to serve as interpreters:

- Dari
- Filipino/Tagalog
- German
- Hebrew
- Pashto
- Portuguese
- Russian
- Spanish
- Ukrainian

2) Future plans

a) The Medical Examiner’s Office finds that its interpretation and translation needs are well met by the professional services available and, on appropriate occasions, by informal interpretation. There is no plan to hire or develop specific language-access staff.

D. TRAINING STAFF ON POLICY, PLAN, AND PROTOCOLS

1) Training protocol

a) The Medical Examiner’s Office will distribute the LEP plan to all staff and will have a current electronic copy available so all staff will be knowledgeable of LEP policies and procedures.

i. The Medical Examiner’s Office will circulate this language access policy and related protocols to all staff within 10 days after adoption.

ii. Every two years, the Medical Examiner’s Office will circulate the revised policy and protocols to all staff after adoption.

b) All staff receiving inbound calls or otherwise interacting directly with the public will receive annual LEP training, or training upon employment and then annually.

i. In order to establish meaningful access to information and services for LEP individuals, staff that regularly interact with the public and those who will serve as in-house interpreters will be trained on Medical Examiner’s Office’s LEP policy, plan and protocols. Training will ensure that staff members are effectively able to work in person and/or by telephone with LEP individuals. Management staff will be included in this training, even if they do not interact regularly with LEP individuals, to ensure that they fully understand the policy, plan, and protocols so they can reinforce their importance and ensure implementation.
ii. LEP training will include information on the following topics:
   (1) legal obligation to provide language assistance;
   (2) LEP plan and protocols;
   (3) identifying and responding appropriately to LEP individuals;
   (4) documenting LEP individuals’ language preference;
   (5) obtaining interpreters (in-person and over-the-phone);
   (6) using and working with interpreters (in-person and over-the-phone);
   (7) translating procedures;
   (8) documenting language requests;
   (9) using bilingual staff as in-house interpreters; and
   (10) using family members or friends as informal interpreters in specific and appropriate circumstances.

c) Within nine months of the adoption of this policy, the Medical Examiner’s Office will provide cultural competency training, including training in regard to this policy and the appropriate use of interpreters and translators, to all staff who have regular interaction with LEP individuals. All new staff members will receive cultural competency training within six months of the beginning of their employment with the Medical Examiner’s Office. After their initial training, all staff members will receive refresher training in cultural competency and language access every three years.

d) Orientation—New staff training will be provided on the Medical Examiner’s Office Language Access Plan and Protocol and provide guidance on how to effectively communicate with LEP residents.

2) Future plans

   a) The Medical Examiner’s Office will incorporate language access into its Dignity Training, which provides front-line employees with tools for dealing more effectively and compassionately with bereaved families.

E. ADMINISTRATIVE HEARINGS

This section is not applicable to the Medical Examiner’s Office.

6. NOTICE OF THE RIGHT TO LANGUAGE ACCESS

A. Posters notifying LEP individuals of their right to language services will be developed and displayed in areas of public contact. These posters will contain a simple message – such as ‘Free Interpreter services are available. Please ask for assistance.’ – and will be in English as well as the principal languages spoken by our customers.

B. The Medical Examiner’s Office general informational leaflet will provide notice of the availability of language services and a simple instruction on how to request language assistance.
C. In all areas of public contact and on its website, the Medical Examiner’s Office will post and maintain clear and readable signs in the languages most prevalent in the City notifying LEP individuals that free translation and interpretation services are available to them.

7. DATA COLLECTION AND ANNUAL REPORT

The following information will be required to be monitored and collected by front-line staff and will be aggregated via quarterly reports by the Department of Health:

(1) Number of LEP encounters (By Language), when they occurred and total time of interaction
(2) Type of Language Services Provided to LEP Customers
(3) Number of Documents Translated
(4) Language Services Expenditures

Additionally, Language Access Coordinators will be required to report quarterly on the following:

(1) Number of bilingual staff
(2) Number of staff trained in Language Access/Cultural Competency

The Department of Health will conduct an annual evaluation of its Language Access Plan to determine its overall effectiveness, review the progress of department goals and identify new goals or strategies for serving LEP residents. The designated staff will lead the evaluation with the assistance of the Director. The evaluation will include the following:

a. Assessment of the use of telephonic interpretation, in-person interpretation and translation services.
b. Assessment of data collected about the LEP’s primary language.
c. Assessment of the number and types of language requests during the past year.
d. Assessment of whether staff members understand the Language Access Plan and procedures, how to carry them out, and whether language assistance resources and arrangements for those resources are up-to-date and accessible.
e. Assessment of complaint information; and
f. Assessment of soliciting feedback from LEP individuals and community groups.

The Department of Health intake personnel will record each person’s language of choice in electronic format to ensure that the information can be used by staff and tracked by the language access coordinator.

g. If the individual is Limited English Proficient, the person’s language of choice will be noted for future visits.
h. Department of Health’s Language Access Coordinator will track the number of individuals that are assisted or unable to be assisted by the person’s language of choice. This information will be considered as part of the annual Language Access Plan report.

Evaluation results and recommended changes will be shared by the Department of Health’s Language Access Coordinators and incorporated into annual report which is required to be filed under Philadelphia Home Rule Charter § 8-600. The Language Access Coordinator will also keep records of any language access services provided and will make this information available during the annual
review process. In connection with updates to the Language Access Plan, the Department of Health may use some of the following tools to conduct further assessment:

i. Request comments and feedback from visitors that have received language services  

j. Establish a tracking system to collect primary-language data for individuals that participate in programs and activities.

8. LANGUAGE ACCESS COMPLAINT PROCEDURE

A. A customer may file a formal Language Access grievance with the Office of Immigrant Affairs if they believe they have been wrongly denied the benefits of this Language Access Plan. The customer must file their complaint within 6 months of the alleged denial.

1) To file a formal complaint, they must fill out a Language Access Grievance Form and submit the form in person, by mail or e-mail to:

   Office of Immigrant Affairs Orlando Almonte  
   Language Access Program Manager  
   1401 JFK Blvd., Suite 1430  
   Philadelphia, PA 19107  
   E-Mail: orlando.almonte@phila.gov

2) The form will also be available on OIA’s website once the website is completed:


B. Additionally, any person, regardless of immigration status, may submit a formal legal complaint through the Philadelphia Commission on Human Relations.

1) To do so, please complete a Public Accommodations Discrimination Intake Form and submit in person or by mail to:

   Philadelphia Commission on Human Relations  
   The Curtis Center  
   601 Walnut Street, Suite 300 South  
   Philadelphia, PA 19106

2) To access the form and for more information, please visit www.phila.gov/humanrelations

9. TIMELINE FOR IMPLEMENTATION

A. Implementation plan logistics

Major milestones in our plan will include:

● Continuing to offer interpretation as needed by our LEP customers
• Updating agency language access tools and resources
• Exploring additional training opportunities

B. Timeline

2016
• Circulate the language access policy and related protocols to Medical Examiner’s Office staff
• Make records request forms available in multiple languages
• Place right to language services posters in lobby
• Review whether additional signage in the office lobby should be translated
• Edit general informational leaflets to include information regarding right to language services
• Review whether portions of the Medical Examiner’s Office website should be translated and/or if our multi-language general informational leaflets should be made available online
• Develop language access training modules for Medical Examiner’s Office employees
• Make changes to Medical Examiner’s Office database to allow easy and searchable collection of language preference information

2017
• Complete cultural competence and language access training for all current public-facing employees, staff who agree to act as in-house interpreters, and managers
10. Signature Page

Gary Sullivan 2/8/17
Language Access Coordinator
Medical Examiner's Office

Date

Sam P. Gulino, MD 2/8/2017
Director
Medical Examiner's Office