

DEPARTMENT OF HEALTH
LANGUAGE ACCESS MASTER PLAN & PROTOCOL
2016

1. PURPOSE AND AUTHORITY

In cooperation with the Mayor's Office, the Department of Health 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").

The purpose of this document is to establish an effective plan and protocol for Department of Health 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 make our office accessible to all Philadelphia residents.

2. GENERAL POLICY

The Department of Health recognizes that the population eligible for services includes individuals who are Limited English Proficient (LEP). It is the policy of the Department of Health to ensure meaningful access to LEP individuals. The Department of Health adopts the following policy to ensure that LEP individuals can gain equal access to the Department of Health services and communicate effectively.

This Plan applies to the following Department of Health satellite offices:

AIDS Activities Coordinating Office
Air Management Services
Ambulatory Health Services
Division of Maternal, Child, and Family Health
Environmental Health Services
Fiscal Division
Get Healthy Philly
Public Health Laboratory

The following plans, due to their outward facing services have submitted and will be held to their individual plans:

Division of Disease Control
Medical Examiner's Office

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 Department of Health intends to take reasonable steps to provide LEP persons with meaningful access to services and programs. The Department of Health seeks to reduce barriers by increasing its capacity to deliver services and benefits to people in their primary language.

The Department of Health, rather than the LEP customer, bears the following responsibilities:

1. Providing language appropriate services.
2. Staff at the initial point of contact have the specific duty to identify and record language needs.
3. Use of informal interpreters such as family, friends of the person seeking services, or other customers must be discouraged.
4. Minor children are prohibited from acting as interpreters.
5. No staff may suggest or require that an LEP customer provide an interpreter in order to receive services.

The preferred method of serving LEP persons is by:

1. Using competent bilingual staff able to provide services directly to the customer in his/her primary language without the need for an interpreter.
2. Available, trained, competent bilingual staff may be used for in-person or telephone interpreting to support other staff.
3. Staff should seek assistance from professional in-person or telephonic interpreters when staff cannot meet language needs.
4. Departments should recognize that certain circumstances may require specialized interpretation and translation services even when staff with bilingual abilities are available (for example, situations concerning HIPAA, confidentiality or anything that may have a legal implication). Staff must be authorized to provide language services to communicate effectively even when such assistance is not requested by the LEP person.

3. LANGUAGE ACCESS COORDINATORS

AIDS Activities Coordinating Office

Language Access Coordinator

Evelyn Torres, Program Implementation Administrator

Director

Coleman Terrell

Air Management Services

Language Access Coordinator

Edward Braun, Program Manager

Director

Kassahun Sellassie

Ambulatory Health Services

Language Access Coordinator

Vanessa Johnson, Health Center Director

Director

Cheryl Kramer

Division of Maternal, Child, and Family Health

Language Access Coordinator

Adina Ekwerike, MCFH Program Analyst Supervisor and Accreditation Liaison

Director

Environmental Health Services

Language Access Coordinator

Dawn Kiesewetter, Program Administrator

Director

Palak Raval Nelson

Fiscal Division

Language Access Coordinator

Jane Baker, Chief of Staff

Director

Thomas A. Farley

Get Healthy Philly

Language Access Coordinator and Director

Cheryl Bettigole, Division Director

Public Health Laboratory

Language Access Coordinator and Director

4. DIRECT CONTACT WITH LEP INDIVIDUALS

The Department of Health

- (1) Office walk ins- The Department of Health has encountered a few LEP individuals coming into the Department of Health looking for help in obtaining services.
- (2) Office calls- at times the Department of Health front desk will receive calls from LEP individuals.

The AIDS Activities Coordinating Office (AACO)

- (1) The Health Information Helpline, administered by the Client Services Unit within AACO, provides intake and referral services to HIV-positive individuals and individuals at risk of acquiring HIV disease. Most services are provided over the phone but walk-ins are allowed. For individuals calling the helpline, staff is proficient in Spanish and French. For other languages, staff has been trained to access the City's interpretation line, Language Services Associates, at Intake and other pertinent documents have been translated into Spanish.
- (2) The Prison Program is located within the City jails. Staff provides prevention and referral services to inmates at high-risk of acquiring HIV disease.
- (3) National HIV Behavioral Surveillance (NHBS) and Medical Monitoring Project (MMP), two research projects administered by the Surveillance Unit within AACO, conduct group and individual interviews with HIV-positive individuals and individuals at risk of acquiring HIV disease. Interview tools are CDC mandated and are available in Spanish. Additional questions that are deemed necessary to the project are translated to Spanish by qualified AACO staff. NHBS is only open to English or Spanish speaking individuals according to CDC protocol.

Air Management Services

- (1) Meetings/Information Sessions- at times AMS will hold meetings or information sessions. If language needs are anticipated, OIA will utilize in person interpretation for appropriate language.
- (2) Inspections – APC Inspectors are fieldworkers that have to go to Dry cleaning sites for inspections. If language needs are anticipated, AMS will utilize in person interpretation for appropriate language.

Ambulatory Health Services

- (1) Face to face contact with patients

Division of Maternal, Child, and Family Health

PDPH MCFH has several points of contact with the public: Home visiting, case management, health education in community and clinical settings are routinely provided by PDPH MCFH. If no bilingual staff are available to interpret, PDPH MCFH staff will continue to use telephonic interpretation.

Environmental Health Services

- (1) Office walk ins- we have walk-in hours Monday to Friday from 9am to 4pm, with bilingual staff on site.
- (2) We utilize either bilingual staff or language line in the field during our regulatory inspections and investigations.

Fiscal Division

- (1) Office Walk Ins: The Fiscal Division maintains a reception desk at its offices on the 1101 Market Street building on the 10th floor. Very rarely LEP individuals may come into the Fiscal Division's office looking for help in obtaining services or requesting information. In these instances, if there is no bilingual staff available to interpret, staff uses telephonic interpretation.
- (2) Meetings/Information Sessions: At times the Fiscal Division may hold meetings or information sessions with a vendor or agency with LEP individuals. If language needs are anticipated, Fiscal Division staff members will utilize in-person interpretation for appropriate languages as needed.

Get Healthy Philly

- (1) Cessation Counseling- Designated Get Healthy Philly staff serve as Cessation Counselors in the City Health Centers. Get Healthy Philly staff also set up appointments with Health Center patients who are referred for cessation treatment by primary care providers.
- (2) Calls from the Public- Get Healthy Philly receives calls from the public to inquire about cessation services, report tobacco sales violations, and other questions/concerns.
- (3) Social Media- Get Healthy Philly communicates important health messages through social media content and large-scale social media campaigns.
- (4) Community Outreach- Get Healthy Philly staff attend festivals, celebrations, health fairs, and other events to share resources and engage Philadelphians on chronic disease related topics and programs.

Public Health Laboratory

The Public Health Laboratory does not have any direct contact with patients.

5. LANGUAGE ACCESS SERVICES AND PROTOCOLS

A. INTERPRETATION

To ensure that the inability to communicate in English does not deprive the public of rights and privileges, our department will continue to provide an interpreter, at no cost to the resident, for LEP persons pursuant to the following procedures:

- (1) An individual approaches an employee and appears to be asking for help but has difficulty communicating what he or she needs, and/or
- (2) When a request for an interpreter is made either orally, in writing or by pointing to a language card, the employee shall determine whether bi-lingual staff in the office is available who speaks the language being requested.

When bilingual staff are not available, the employee shall contact a telephone interpreter service to provide interpreter services, the process to do so outlined below:

Telephonic Interpretation –

Department of Health can get an over-the-phone interpreter by calling the following vendor: Language Services Associates. This service is available 24/7.

To submit a request, call 866-592-XXXX and provide the following information when greeted by a coordinator:

- When prompted, please enter your five-digit access code: XXXXX
- Press 1 for Spanish, 2 Mandarin, 3 Cantonese, 4 Arabic, or 9 for all other languages.
- For Spanish, Mandarin, Cantonese and Arabic, the interpreted session may now begin.
- For all other languages, when greeted by a coordinator, request the language needed or ask for assistance in identifying the language.
- Hold momentarily while your interpreter is connected. Once on the line, you will be notified and provided with the interpreter’s ID number.
- Explain the objective of the call to the interpreter. Then proceed by speaking directly to the Limited English Proficient speaker in the first person.
Example: “What is your name?” NOT “Ask her what her name is.”
- Upon completion of the call, all parties should simply hang up. Your time will be automatically recorded.

When an LEP person requests in-person interpretation for a future meeting, telephonic or in-person interpretation may be used, the process for requesting an in-person interpretation is below:

In-Person Interpretation –

Staff can request an in-person interpreter by contacting the following vendor: Nationalities Service Center. This service is available 24/7, but please give more than 48 hours’ notice whenever possible. In an emergency, use a telephonic interpreter.

Before submitting a request for in-person interpretation, please receive approval from the Language Access Coordinator.

To submit a request online, visit www.nscphila.org/language-access-services/request-services

- Fill out service request form and be sure to select interpretation
- Enter any interpretation appointment information available
 - o You will receive an email once an interpreter has been confirmed

Cancellation of In- Person Interpreter

If a request in-person interpreter will not be needed, call Nationalities Service Center to cancel the request at least a full business day in advance of the scheduled time (if possible.)

1.) Future Plans-

- a. **Use telephonic interpretation, and ensure that the public knows about the availability of these services.** The Department of Health makes telephonic interpretation services available in its main office through Language Services Associates. The telephonic interpretation service is available in over 170 languages. The office will continue to inform the public about these resources through social media, visible multilingual signs and will train all of its staff on using telephonic interpretation services.
- b. **Grow in-person interpretation services.** The Department of Health can offer in-person interpretation for scheduled meetings and events as needed through Nationalities Service Center if given enough notice. Department of Health will continue to inform the public about these resources through social media, visible multilingual signs and will train all of its staff on requesting in-person interpretation services.

B. TRANSLATION

To ensure that the inability to communicate in English does not deprive the public of rights and privileges, our department will continue to provide translations, at no cost, for LEP individuals. This includes translations of vital documents, signage and portions of our website.

Vital Documents - The Department of Health has developed a list of the documents that are vital to the access of LEP persons. The Department of Health currently provides some vital documents in the following languages: Spanish, Simplified Chinese, and Traditional Chinese.

Vital Documents to be translated include:

AIDS Activities Coordinating Office:

- a. CSU Intake forms*
- b. Housing application and guidelines*
- c. NHBS and MMP interview questionnaires*
- d. Release of information forms*
- e. Prison Program intake and client forms*
- f. HIV information brochures*
- g. CSU wallet cards*

* These documents are currently available in English and Spanish.

Air Management Services

- a. AMS has added Korean language forms for permitting and licensing application

Ambulatory Health Services

Ambulatory Health Services has not identified vital documents to translate.

Division of Maternal, Child, and Family Health

Currently, Educational materials are translated into Arabic, Spanish, Vietnamese, and Urdu.

Environmental Health Services

EHS has created translations of inspection reports and health information literature.

Fiscal Division

The Fiscal Division and IT Divisions do not have public website and do not have signs or public waiting areas. The Fiscal Division and IT Division will translate documents based on need.

Get Healthy Philly

- a. Healthy Corner Store Initiative and locations of stores
- b. Location of Farmers Markets and Farm Stands
- c. Information on being physically active
- d. Information on sugar-sweetened beverages
- e. Get Healthy Philly mission, partners, and list of additional resources;
- f. Stories of Philly Powered Ambassadors
- g. Ideas for ways to be physically active

Public Health Laboratory

The Public Health Laboratory do not have any documents translated into other languages and will translated based on need.

Future Plans

- a. After collecting data to determine our department's language needs, the Department of Health will reevaluate the forms and languages represented above.
- b. In Fiscal Years 2016-17, Get Healthy Philly will translate additional select documents and make them available through the website, newsletter, and/or community engagement meetings and other events. Get Healthy Philly will periodically review the GHP webpages with the goal of improving its accessibility to LEP persons. This includes identifying the most important information to be translated and the best means for disseminating translations to LEP communities.
- c. AMS will add Spanish and Korean to the office signage and ensure that additional languages are included on the website.
- d. The Fiscal and IT Divisions plan to continue training and to translate documents as staff members identify forms or documents that members of the public see or use.
- e. Ambulatory Health Services future plans for improving already established translation services and protocols is to continue to write public materials in plain English for easier translation. Ambulatory Health Services will continue to make resources widely known throughout all health centers and will continue to enforce agency protocols that support high quality translations.

Procedure for Submitting a document for translation:

- a. Email the editable document to your department's language access coordinator. Contact information on page 5 of this plan.
- b. The language access coordinator will submit the translation request to the OIA
- c. The OIA will submit translation to vendor to obtain a quote
- d. The Office of Immigrant Affairs will email the language access coordinator with a quote for approval
- e. Quote must be authorized by the Director
- f. Quote is then signed and emailed back to Office of Immigrant Affairs
- g. Office of Immigrant Affairs will email Department of Health the translated documents

NOTE: Before submitting a document for translation, staff will review documents and ensure the following:

- The content has not already been translated in another document.
- The document and translation procedure have been approved by your supervisor.
- The document is in a format that can be edited (e.g. MS Word, Publisher, InDesign, etc.)
- Terms that do not want translated are highlighted, i.e. the name of your unit, program or street.
- The document is written so it can be understood by readers with lower literacy skills.
- If the translation is a continuation of a series or collection of documents, staff may request the same vendor to keep the translation consistent.

Website

The Department of Health's website is currently in english only.

Get Healthy Philly's Philly Powered website is fully translated into Spanish, and portions of its Food Fit Philly website are translated into Spanish.

Future Plans: Write public materials in plain English, and translate extensively. The Health Department and its satellite office mentioned in this plan will work to add necessary and important information into Spanish first. Taglines will be included in the website that explains that LEP individuals can obtain a translation of documents or that interpretation is available in our office.

C. BILINGUAL STAFF

The Department of Health has an extensive number of bilingual staff. Languages spoken by bilingual employees include:

Amharic, Arabic, ASL, Cambodian, Cantonese, Creole, Dari, Fante, Farsi, French, Gujarati, Hebrew, Hindi, Ibibio, Igbo, Indonesian, Italian, Japanese, Korean, Kreyol, Malayalam, Mandarin, Mandingo, Marathi, Pathwah, Polish, Russian, Spanish, Swahili, Tagalog, Urdu, Vietnamese, and Yoruba

Future Plans-

The Department of Health will determine future plans after collecting data to illustrate the demand and need of language interpretation and translation.

If the committee comes to a conclusion that additional staff is needed to meet LEP needs, the committee will recommend applying “bona fide occupation qualification” for community based positions.

A “bona fide occupational qualification” is one that is essential to the effective performance of the job. When individuals are sought for positions in which they interact with LEP residents, language skills may be a “bona fide” or relevant job qualification.

D. TRAINING STAFF ON POLICY, PLAN, AND PROTOCOLS

The Department of Health’s Language Access Plan & Protocol will be posted online, and provided as an electronic copy to all Department of Health staff members at hiring.

The Department of Health 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.

All staff providing technical assistance, training or receiving in-bound calls will receive annual LEP training, or training upon employment, and then annually.

LEP training will include information on the following topics:

- Legal obligation to provide language assistance;
- LEP plan and protocols;
- Identifying and responding appropriately to LEP individuals;
- Documenting LEP individual's language preference;
- Obtaining interpreters (in-person and over-the-phone);
- Using and working with interpreters (in-person and over-the-phone);
- Translating procedures;
- Documenting language requests; and
- Using or not using bilingual staff as in-house interpreters.

The Department of Health will circulate this language access policy and related protocols to all staff within 10 days after adoption. Every two years, the Department of Health will circulate the revised policy and protocols to all staff after adoption. Within nine months of the adoption of this policy, the Department of Health 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 a year of the beginning of their employment with the Department of Health. After their initial training, all staff members will receive refresher training in cultural competency and language access every three years.

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 the Department of Health'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.

Orientation- New staff training will be provided on the Department of Health Language Access Plan and Protocol and provide guidance on how to effectively communicate with LEP residents.

Future Plans:

1. **Further standardize language access resource and tools across the Department of Health.** The Department of Health will work with internal subdivisions to update and standardize language access tools and resources across the agency. Department of Health will also work to ensure that all public-facing programs have appropriate language access signage and materials in multiple languages available at sites. Another goal is to update and freshen the agency's language database of staff who speak languages other than English and who are willing to help review translated materials and/or assist with interpretation in emergencies. In addition, the Department of Health will update its Language Access Toolkit, an internal resource for staff, and will meet with agency employees to share challenges and best practices.
2. **Grow plain language and other language access-related trainings.** The Department of Health hopes to hold training opportunities on plain-language and cultural competency topics and will explore opportunities to do so.

E. ADMINISTRATIVE HEARINGS

This section applies does not apply to the Department of Health at this time.

6. NOTICE OF THE RIGHT TO LANGUAGE ACCESS

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 in the service area.

Department notices and flyers will also provide notice of the availability of language services and a simple instruction on how to request language assistance.

Taglines will be included in or attached to a document. Taglines in languages other than English can be used on documents written in English that describe individuals with LEP can obtain translation of the document or an interpreter to read or explain the document. The Department of Health will contact the OIA for support in creating taglines.

In all areas of public contact and on its website, the Department of Health 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

You may file a formal Language Access grievance with the Department of Health if you believe you have been wrongly denied the benefits of this Language Access Plan. You must file your complaint within 6 months of the alleged denial. To file a formal complaint, you 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
Municipal Services Building
1401 JFK Blvd., 14th Floor, Suite 1430
Philadelphia, PA 19102
E-Mail: orlando.almonte@phila.gov

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

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

9. TIMELINE FOR IMPLEMENTATION

See appendix B for timelines relating to each satellite office

10. SIGNATURE PAGE

Thomas Fealey

1/31/17

Commissioner

Date

Appendix B: Timeline by Satellite Office

AIDS Activities Coordinating Office

Major milestones in our plan will include:

- a. Continuing to broadly translate and interpret
- b. Updating agency language access tools and resources; and
- c. Exploring additional training opportunities.

CY 2016 Timeline

- a. The Language Access Coordinator will meet with management from the relevant units to review the Language Access Plan and discuss challenges, best practices and methods for implementing the plan.
- b. The Language Access Coordinator will review AACO's existing internal protocols for written translations and in-person interpretations as it relates to the Plan.
- c. New protocols/procedures will be targeted for implementation in 2017.

CY 2017 Timeline

- a. Relevant staff will be trained in the first six months regarding the Language Access Plan, including protocols and procedures. Needed materials for the front desk will be acquired. The Language Access Coordinator will follow-up with staff members who speak other languages and who are willing to help review translations and provide interpretation services. These employees will receive the appropriate training.
- b. New protocols and procedures will be implemented and data tracking will begin in July 2017 and throughout the remainder of the year.
- c. It is expected that the Plan will be fully implemented by 12/30/17.

Air Management Services

CY 2016

- a. Fiscal Division Language Access Plans Submitted
- b. Improvements Identified and Prioritized Based on LEP Feedback
- c. Improvements Implemented in Fiscal Division

CY 2017

- a. Continual Evaluation and Annual Reporting Thereafter

Ambulatory Health Services

Major milestones in our plan will include:

- a. Continuing to broadly translate and interpret
- b. Updating agency language access tools and resources
- c. Exploring additional training opportunities

Timeline

CY 2016-2017

- a. The Language Access Committee will meet regularly to discuss language access challenges, best practices and methods for tracking language access data by program/site as well as brainstorm ideas for new or updated language access resources these staff might need.
- b. Ambulatory Health Services will update the Language Access Plan periodically to ensure that all information is relevant and update.
- c. Ambulatory Health Services will work closely with City Hall and will communicate with other City agencies about best tools and practices.
- d. Ambulatory Health Services will continue to broadly translate materials and provide onsite interpretation as needed and track these activities.
- e. Ambulatory Health Services will continue to train staff and meet with frontline staff to discuss language access and any emerging needs and challenges.

Division of Maternal, Child, and Family Health

Major milestones include:

CY 2016: Continuing to broadly translate and interpret

CY 2017: Updating agency language access tools and resources

CY 2018: Exploring additional training opportunities

Environmental Health Services

CY 2016

- d. Fiscal Division Language Access Plans Submitted
- e. Improvements Identified and Prioritized Based on LEP Feedback
- f. Improvements Implemented in Fiscal Division

CY 2017

- b. Continual Evaluation and Annual Reporting Thereafter

Fiscal Division

CY 2015

- a. Departmental Language Access Plan Submitted

CY 2016

- g. Fiscal Division Language Access Plans Submitted
- h. Improvements Identified and Prioritized Based on LEP Feedback
- i. Improvements Implemented in Fiscal Division

CY 2017

- c. Continual Evaluation and Annual Reporting Thereafter

Get Healthy Philly

Major milestones in our plan will include:

- a. Continuing to broadly translate and interpret

- b. Updating agency language access tools and resources
- c. Exploring additional training opportunities

CY 2016

- a. The Get Healthy Philly staff will meet to discuss language access challenges, best practices and methods for tracking language access data by program/site, as well as to brainstorm ideas for new or updated language access resources these staff might need.
- b. The agency will communicate with other PDPH Divisions about best practices, tools that can be shared and challenges.
- c. The agency will continue to broadly translate materials and provide on-site interpretation as needed, and to track these activities.

CY 2017

- a. Get Healthy Philly will continue to improve LEP access to websites and social media
- b. The Director will continue to communicate with frontline staff to discuss language access and any emerging needs/challenges.
- c. GHP will conduct plain language and/or cultural competency trainings.

Public Health Laboratory

CY 2016

- j. Fiscal Division Language Access Plans Submitted
- k. Improvements Identified and Prioritized Based on LEP Feedback
- l. Improvements Implemented in Fiscal Division

CY 2017

- d. Continual Evaluation and Annual Reporting Thereafter