



Health and Human Services

2016- 2017

Auxiliary Aids Plan for Persons with Disabilities and Limited-English Proficiency



CREDIBILITY • INTEGRITY • ACHIEVEMENT

Auxiliary Aids Plan for Persons with Disabilities and Limited-English Proficiency

1. General

This plan provides for the implementation of company policy and establishes procedures for the provision of auxiliary aids ensuring accessibility to all programs, services and employment to persons with disabilities (for hearing impairment specifics please reference Auxiliary Aids Plan for Deaf or Hard-of-Hearing Persons) and persons with Limited-English Proficiency (LEP). The policy and procedures described in this plan apply to all programs administered by Health and Human Services (HHS). Contracted service providers providing direct services to clients or potential clients shall develop a similar plan to ensure compliance with all civil rights laws.

2. Policy

HHS will provide appropriate auxiliary aids to persons with disabilities and interpreters to persons with Limited-English Proficiency where necessary to afford such persons and equal opportunity to participate in or benefit from program, services and employment. Braille and taped materials, interpreters, readers, listening devices, television decoders, visual fire alarms using strobe lights, captioned films and other assistive devices for persons with impaired hearing or vision or with limited-English proficiency.

a. All qualified and potential clients are entitled to an equal opportunity to use and benefit from the programs and services of the department and its contracted service providers. This includes reasonable accommodations to ensure that programs and services are equally accessible to and equally effective for otherwise qualified persons with disabilities who have hearing, vision or mobility impairments. HHS will take reasonable steps to provide services and information in appropriate languages, other than English, to ensure that limited-English proficiency persons are effectively informed and can effectively participate in and benefit from its programs, services and activities.

b. Auxiliary aids or language interpreters will be available for use by clients, potential clients, employees and applicants with impaired sensory, manual or speaking skills in each phase of the service delivery or employment process (e.g. telephone inquiries, requests, intake interviews, employment interviews, term and conditions of employment, service provision, counseling and complaints, etc.) at no cost.

All employees are responsible for ensuring equal accessibility and equally beneficial services to all clients and potential clients of the department.

3. Definitions:

- **Accommodation to Persons with Disabilities** – It is the obligation of the Agency to make reasonable accommodations for a client, or potential client's physical and mental limitations. Exception: If the accommodation clearly affects the safety and efficiency of the organization or substantially affects costs, the accommodation is not required.
- **ADA/Section 504 Coordinators** – Any individual charged with implementing the requirements of Titles I and II of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act, ensuring the provision of auxiliary aids and services for deaf or hard of hearing, limited English proficient customers/clients, and customers with disabilities requiring aid essentials. Within the State of Florida, Department of Children and Families, Civil Rights Officers are designated ADA/Section 504 Coordinators
- **Americans with Disabilities Act (ADA) of 1990, as amended-** Comprehensive law which prohibits discrimination against people with disabilities in employment (Title 1), in public services (Title II, in public accommodations (Title III) and in telecommunications (Title IV). The ADA amendments of 2008 expanded the scope of the ADA to be consistent the Congressional intent of the original law.
- **Applicant** - A person seeking either employment or services from HHS but not yet hired or determined eligible for a program or service.
- **Assistive Listening Devices and Systems (ALDS)** – Term for amplification systems used to improve hearing ability in large areas and in interpersonal communications systems. These systems deliver the desired signal directly to the ears or hearing aids of the listener, thus overcoming the negative effects of noise, distance and echo. Four main types are available: hardwire, loop, infrared and FM.
- **Auxiliary Aids and Services-** The wide range of services (e.g. sign language, interpreters, captioning, Braille, note taking, texting, internet) and devices (e.g. assistive listening systems, page magnifiers, TTYs/TDDs, voice output computer hardware/software, communication boards, speech synthesizers) used to ensure effective communication, which applies to both aural and visual modes. This term does not apply to permanent physical renovations, alterations and construction, such as providing parking spaces, ramps, widening doors, etc. It is only used in the contest of effective communication. The type of aid or service will vary according to the complexity of the communication and the needs of the person with a disability.

- **Blind** - See Visual Impairment
- **Captioning (Closed)** – Refers to converting the spoken word to text displayed in the visual media (videos, television, etc.) in a way that it is available only to individuals whose televisions are equipped with captioning decoders.
- **Captioning (Open)** – Refers to converting the spoken word to text displayed in the visual media (videos, television, etc.) so that it is seen by everyone who watches the film (it cannot be turned off)
- **Captioning (Real Time)** – The simultaneous conversion of spoken words to text, through computer-assisted transcription or court reporting, and displaying that text on a video screen. This communication service is beneficial to individuals with hearing impairments that do not use sign language or for whom assistive listening devices and systems are ineffective.
- **Certified Interpreter** - A person who is certified by the National Registry of Interpreters for the Deaf or other national or state interpreter assessment and certification program.
- **Civil Rights Officer** – Employee responsible for investigations, compliance monitoring and review, technical assistance, and coordination of civil rights activities.
- **Client** – As used in this plan, this term means anyone applying for or participating in the employment process, program services or activities. It includes persons making general inquiries or in any way seeking to access to or receiving information from our agency, either in person, in writing or via telecommunications.
- **Communication Disabilities** – A comprehensive term which includes hearing impairment, speech impairment (for aural, oral communication), visual impairment, or other disabilities that present impairment to reading (for written, visual communication).
- **Deaf** – A term used to describe a person having a permanent hearing impairment and being unable to discriminate speech sounds in verbal communication, with or without the assistance of amplification devices.
- **Disability** – A condition that substantially limits a major life activity, such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, lifting, sleeping, and working.

- **Dual Sensory Impairment** – A term used to describe a person having both a visual impairment and a hearing impairment. The term includes all ranges of loss, which would necessitate the use of auxiliary aids and services for communication.
- **Employee** – All persons working for the agency.
- **Florida Relay Service** – The Florida Relay Service (FRS) which was implemented in 1992, is a service offered to all persons in the state which enables a hearing person to communicate with a person who is hearing or speech impaired and must use a TT/TTY, through a specially trained operator called a communications assistant.
- **Hard of Hearing** – A term used to describe a person having a permanent hearing impairment, which is severe enough to necessitate the use of auxiliary aids or services to discriminate speech sounds in verbal communication.
- **Hearing Impairment** – This is an all-inclusive term to describe any hearing loss. A person with a hearing impairment could be either deaf or hard of hearing. It is inappropriate to use the term to exclusively mean deaf or to exclusively mean hard of hearing. For example, it is inappropriate to say “persons who are deaf or hearing impaired”. The correct statement would be “persons who are deaf or hard of hearing” or “persons who are hearing impaired.”
- **Manager** – As used in this plan, this term means an agency employee at the supervisory level or above who is responsible for supervising staff or an agency function and for the physical space in which such staff or program operates.
- **Manual Disability Impairment** – A term used to describe a condition, which limits or prevents the use of a person’s upper extremities (arms, hands).
- **Mental Disability Impairment** – The ADA defines this as a term, which includes mental or psychological disorders such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.
- **Mobility Impairment** – For the purpose of this plan, this term is used to describe a condition that substantially limits a person’s upper or lower body mobility. It includes those persons who have limited use of arms, shoulders; persons who are in wheelchairs or on crutches; people of short

stature; those who cannot perform certain hand movements or have difficulty controlling movement; and people with breathing difficulties or stamina limitations. It also includes persons with visual impairments.

- **Physical Disability** – This is a broad term which includes physiological disorders or conditions, cosmetic disfigurement and anatomical loss. It includes orthopedic, visual, speech, and hearing impairments, cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, HIV disease (symptomatic or asymptomatic), tuberculosis, drug addiction and alcoholism.
- **Print Impairment** – An organic condition or disability that leads to an inability to use traditional printed material (10-12 point print). This term includes persons with visual impairments, physical disabilities that result in an inability to hold or turn pages of a book (e.g. arthritis, cerebral palsy, muscular dystrophy, multiple sclerosis, stroke, paralysis, amputation, and learning disabilities (e.g. dyslexia).
- **Program Accessibility** – An ADA standard which means a public entity's program, services, or activities, when viewed in their entirety, must be readily accessible to and usable by individuals with disabilities. The concept of program accessibility is intended to make the contents of the program, service or activity equally available and accessible to persons with disabilities without excessive renovations of facilities. This allows and encourages the provision of alternative-but equally beneficial-means of providing the program service or activity. Programs, services and activities include everything the agency does. (See also: Undue Burden)
- **Qualified Interpreter** – The ADA defines qualified interpreter as a person who is able to interpret effectively, accurately, and impartially both receptively (i.e. can understand what both persons in the conversation are signing and saying) and expressively (i.e., can then sign or say to the other person what it is being said or signed), using any necessary specialized vocabulary. For example, in order to be qualified in a legal setting, the interpreter would have to be familiar with legal terminology used; in order to be qualified in a medical or mental health setting, the interpreter would have to know medical and psychiatric or psychological terms used in that setting.
- **Reasonable Accommodation** – A term, used in conjunction with employment, meaning any change or adjustment to a job or work environment that permits a qualified applicant or employee with a disability to participate in the job application process, to perform essential functions of a job, or to enjoy benefits and privileges of employment equal to those enjoyed by employees without disabilities. An Accommodation would be

considered reasonable unless such change or adjustment imposes an undue hardship on the responsible entity. (See “Undue Hardship”)

- **Staff** – As used in this plan all employee of the agency other than managers
- **Sensory Impairment** – This is a general term used to describe impairment of vision or hearing. For the purposes of this document, it also includes impairment of speech.
- **TTD/TTY/TT** – Terms used to designate a text telephone, a typewriter-like device used to transmit conversation across telephone lines. In this document, this device will be referred to as a TDD/TTY.
- **Undue Burden** – This term, used in conjunction with programs and services (ADA Title II) mean an unreasonably excessive financial cost or administrative inconvenience in making alterations to building or facilities in which programs, services or activities are conducted, in order to ensure equal benefit to persons with disabilities.

Note: Program access requirements of ADA Title II should enable individuals with disabilities to participate in and benefit from the programs, services and activities of public entities in all but the most unusual cases. Determination of undue burden can be made only the agency CEO or his/her designee, after considering all resources available for use in the funding and operation of the program, service or activity and must be accompanied by a written statement of reasons for reaching that determination. The public entity must take any other action that would nevertheless ensure the individual with the disability receives equal benefit from the program, service or activity.

- **Undue Hardship** – This term in conjunction with employment, means significant difficulty or expense relative to the operation of a public entity’s program. Where a particular accommodation would result in an undue hardship, the public entity must determine if another equally appropriate accommodation is available which would not result in an undue hardship, and provide that accommodation. Only the CEO or his/her designee may determine undue hardship.
- **Visual Impairment** – A generic term used to describe all loss of vision that, although supplemented with corrective lenses, requires auxiliary aids or services, such as Braille, large print, computer disks, taped material, or qualified readers.

4. Procedure

The following procedures are to be followed by employees to ensure accessibility of programs and services to clients or potential clients with disabilities or limited-English proficiency.

a. Assessment of client, employee or applicant needs by consulting with the individual concerning his or her preferred communication mode and if applicable with assigned caseworkers, counselors, parents, family members, guardians or other agency representatives.

b. The communications options for hearing impaired persons may include but are not limited to TDD (telecommunication devices for the deaf), fax (telephone facsimile transmittal), phone amplifiers, sign language interpreters, flash cards, lip reading, written notes, supplementary hearing devices, charts, signs or a combination of these.

c. The agency administrative official with budget approval over the facility involved or the designated official as otherwise provided in this plan has the responsibility for approving the request and obtain the appropriate auxiliary aid or interpreter.

d. Auxiliary aids or interpreters will be provided within two days of request or as otherwise required. Delaying services is not always practical or appropriate; therefore, provision will be made when advance notice for an aid or interpreter is not given. Client files will be documented to indicate if an aid or interpreter is needed. If so documented, the agency will arrange to have the auxiliary aid or interpreter available for advanced scheduled appointments. Also, when the agency or provider refers a client to a provider, the agency will notify the provider of any aid or interpreter needs.

e. The use of auxiliary aids or interpreter will be at no cost to the client, employee or applicant. Auxiliary aids or interpreters will normally be obtained within the agency or provider's current resources, including the use of qualified volunteers and volunteer organizations. However, if an auxiliary aid or interpreter is required and services must be purchased, payment will be made the appropriate operating budget.

1. Language services include, as a first preference, the availability of bilingual staff that can communicate directly with clients in their preferred language.

2. When bilingual staff is not available, the next preference is face-to-face interpretation provided by trained staff or contract or volunteer interpreters.

3. Other interpreter services will be used as a supplemental system when an interpreter is not available, or when services are needed for an unusual or infrequently encountered language.

f. The LEP individual must be offered free interpreter service first. If the individual declines the use of the free interpreter, the record must be documented to reflect the individual declined. Staff should suggest that a trained interpreter be present during the encounter to ensure accurate interpretation and should document of the offer any declination in the LEP person's file. The interpreter must be proficient in both English and the other language and should have received orientation and training which includes the ethics of interpreting and possess fundamental knowledge in both languages of any specialized terms and concepts peculiar to the program or activity. The use of family members could result in a breach of confidentiality or reluctance on the part of the individual to reveal personal information critical to their situation. In an abuse investigation, reluctance or failure to reveal critical personal information could have serious consequences. A family member or friend may be used as an interpreter if this approach is requested by the LEP individual and the use of such a person does not compromise the effectiveness of services or violate confidentiality. Minor children should never be used as interpreters or be allowed to interpret for a parent. Interpreters could include competent bilingual staff, staff interpreters, volunteer community interpreters, contracted interpreter services or telephone interpreter services. See Appendix B-C

g. If an auxiliary aid is found to be ineffective, the staff should immediately determine which mode of communication with the client the client would then prefer. The staff should be well versed in other auxiliary aids communication options and offer these options to the client, so that the client can have all the information available to make the choice. Staff should continue to work with the client to determine the best mode of communication. Documentation shall be made in the client's file regarding the attempt to improve the effectiveness of auxiliary aids and services.

h. Documentation, with supporting justification, must be made if any request was not honored. The HHS Director is the only person that can deny auxiliary aid requests made by a client or companion. If a staff person is not familiar with an auxiliary aid request, please contact the SPOC for information as well as ask the client for any information that you may need to secure this aid, but reiterate that the cost of any auxiliary aid is the responsibility of the agency and not the participant. The staff should work with the client and the HHS Director to determine the best auxiliary aid to utilize to ensure appropriate communication services.

5. Resources /Training

Auxiliary aids will normally be obtained within the agency's current resources. Staff will be trained on how to assist sensory and mobility impaired or LEP individuals. Annually, all employees will be responsible to complete the Department of Children and Families' (DCF) "Service Delivery for the Deaf and Hard of Hearing" training, located on DCF's public website. Resources available to the agency can be found on the following appendixes:

- Appendix: A contains instructions on in-person communication skills for staff that may interact with individuals who are deaf; hard of hearing; have speech impediments; physical disabilities; or dual sensory impairments; are visually impaired or have limited-English proficiency.
- Appendix B: HHS Multilingual Directory, is a list of staff that may be used as interpreters or translators.
- Appendix C: Private Sector Translators & Interpreter listing

6. Notification

The agency will post auxiliary aid availability, non-discrimination poster(s) and LEP information in the buildings reception and lobby areas.

7. Monitoring

QA monitoring will take place at the end of each program year for senior management review.

Agency CEO

Agency Civil Rights Officer

APPENDIX A

1. INTERACTING WITH INDIVIDUALS WITH PHYSICAL DISABILITIES

As with all people, persons with physical disabilities have specific needs. Please use the following guidelines when communicating with a person with mobility or physical impairment:

Do not make assumptions about what the person can or cannot do. Always ask if the person would like assistance before you help. Your help may not be needed or wanted.

Do not touch a person's wheelchair or grab the arm of a person walking without first asking if he or she would like assistance.

Do not hang or lean on a person's wheelchair because it is part of the wheelchair user's personal space.

Never move someone's crutches, walker, cane or other mobility aid without permission.

When speaking to a person in a wheelchair for more than a few minutes, try to find a seat for yourself so the two of you are at eye level.

Speak directly to the person in a wheelchair, not to someone nearby as if the wheelchair user did not exist.

Do not demean or patronize the wheelchair user by patting him/her on the head.

Do not discourage children from asking questions about the wheelchair. Open communication helps overcome fearful or misleading attitudes.

When a wheelchair user transfers out of the wheelchair to a chair, car or bed, do not move the wheelchair out of reach.

Do not raise your voice or shout. Use normal speech. It is OK to use expressions like "running along". It is likely that the wheelchair user expresses things the same way.

Be aware of the wheelchair user's capabilities. Some users can walk with aid and use wheelchairs because they can conserve energy and move about quickly.

Do not classify persons who use wheelchairs as sick. Wheelchairs are used for a variety of non-contagious disabilities.

Do not assume that using a wheelchair is in itself a tragedy. It is a means of transportation/freedom that allows the user to move about independently.

2. INTERACTING WITH INDIVIDUALS WHO ARE BLIND OR HAVE LOW VISION

Persons who are blind or have low vision have specific needs. Please use the following guidelines when communicating with persons who are blind or have low vision:

The first thing to do when you meet a blind person is to identify yourself.

When speaking, face the person directly. Speak in a normal tone. Your voice will let the person know where you are.

Do not leave without saying that you are leaving.

Some individuals who want assistance will tell you. You may offer assistance if it seems needed, but if your offer is declined, do not insist.

When offering assistance, say, "Would you like to take my arm?" and allow the person to decline or accept. The movement of our arm will let the person know what to expect. Never grab or pull the person.

When going through a doorway, let the person know whether the door opens in or out and to the right or left.

Before going up or down stairs, let the person know that you are going up or down, and advise if there is a handrail and where it is. Ask the person if he or she would like assistance-he or she would let you know.

When giving directions, or describing where things are in a room or in the person's path, be as specific as possible, and use clock clues where appropriate.

When directing the person to a chair, let the person know where the back of the chair is, and he or she will take form there.

If the person has a service animal, do not distract or divert the animal's attention. Do not pet or speak to the animal unless the owner has given you permission.

The person's single greatest communication need is to have access to visual information by having the information either read or provided in an accessible format (e.g. Braille, audio).

3. INTERACTING WITH INDIVIDUALS WITH DUAL SENSORY LOSS

The means of communication with a person with dual sensory loss will depend on the degree of hearing and vision loss. Use all of the suggestions in the above sections on hard of hearing and visual loss. The person with dual sensory loss has unique and very challenging communications needs. Staff is to use every possible means of communication available.

4. INTERACTING WITH INDIVIDUALS WITH LIMITED-ENGLISH PROFICIENCY

Many people who are eligible for services cannot effectively use those services because they are not proficient in English. Language barriers prevent us from effectively serving a large number of people. Breaking down these barriers will allow individuals with limited English proficiency to participate in the programs administered by the agency.

The way a person with Limited-English Proficiency communicates in English will vary from no English, to a little English or to very well. Use the following guidelines when communicating with a person with LEP.

Ask the person if he/she needs a translator. Use posting(s) available to determine language need.

If you are using an interpreter, the interpreter may lag a few moments behind what is being said, so pause occasionally to allow time for a complete translation.

Talk directly to the person, not the interpreter. However, the LEP person may look at the interpreter and may not make continuous eye contact with you.

If you know a little of the language, try using it. It may help you communicate and at least demonstrates your interest in communicating and willingness to try.

Do not simplify your speech or raise your voice. Speak in a normal tone.

The person's single greatest communication need is to have access to the information by having the information either orally translated or provided in their language in written form.

Be patient and sensitive to the needs of the LEP person.

APPENDIX B

HHS Multilingual Staff Directory (As of 10/1/16)

Dept.	Language	Name	Position	Phone	Proficiency	KSA
FIP	Spanish	Sylvia Espinosa-Velez	Fed. Funding Specialist	209-6090	Fluent	spk/read
FIP	Spanish	Claudia Sheremeta	Adoption Specialist	209-6109	Fluent	spk/read
FIP	Spanish	Jessica Watkins	DCM	209-6093	Basic	spk/read
FIP	Italian	Anna Taylor	DCM	209-6118	Fluent	spk/read
FIP	ASL	Schquana Lewis	Admin. Asst.	209-6116	Basic	Sign
FIP	ASL	Joyce Meyerpeter	Admin. Asst.	209-6131	Basic	Sign
FIP	Hungarian	Zsuzsa Kormendy	DCM	209-6086	Fluent	spk/read
FIP	French	Heather Craig	Driver	209-6098	Basic	spk/read
SS	German	Kerstin Atkins	Case Specialist	209-6148	Fluent	spk/read

APPENDIX C

Private Sector Translator & Interpreter Services

Primary:

Signs of Interpreting

(904) 207-0290

Meiching@signsofinterpreting.com

Agape Interpreting Services

(904) 797-2020

DiAndria@AgapeInterpreting.com

First Coast Interpreting and Translations, Inc.

(904) 721- 9139

scheduling@firstcoastinterpreting.com

Jorge Luis Rivera

(904) 315-9926

rocketapache@yahoo.com

Language Line Services

1-866-874-3972

www.languageline.com

International Languages Services, Inc.

(904) 565-1205

Interpreter Qualifications:

In the field of sign language interpreting, as in other professions, appropriate credentials are an important indicator of an interpreter's qualifications.

Certification is awarded to interpreters who successfully pass national tests.

These tests assess not only language knowledge and communication skills, but also knowledge and judgment on issues of ethics, culture and professionalism.

An interpreter may hold one or more certifications. Some common sign language interpreting certifications are:

Registry of Interpreters for the Deaf (RID)

CI-Certification of Interpretation

CT-Certificate of Transliteration

CDI-Certified Deaf Interpreter
OTC-Oral Transliterating Certificate
Legal SC: L-Specialist Certificate

National Association of the Deaf (NAD)
NAD Level III-Generalist
NAD Level IV-Advanced
NAD Level V- Master

Staff should always verify an interpreter's credentials and certification prior to engaging in the service with the client.

Interpreter Ethics

Professional interpreters adhere to the RID code of ethics which holds interpreters to a high level of professionalism in matters of interpretation and business practices. RID, along with the National Association of the Deaf (NAD), co-authored the ethical code of conduct for interpreters.