

Language Access Plan & Guide for Healthcare Providers

2025–2026

This guide provides a framework to help healthcare providers (clinics, hospitals, independent practices, dentists, chiropractors, nurses, and allied health professionals) develop and implement a **Language Access Plan (LAP)** that complies with **Title VI of the Civil Rights Act, Section 1557 of the Affordable Care Act**, and state regulations.

The goal is to ensure that all patients with **Limited English Proficiency (LEP)**, as well as patients who are **deaf, hard of hearing, deafblind, or speech disabled**, have **equal access to care in their primary language**.

1. Informing Patients About Available Services

Healthcare staff must **proactively notify patients and families** that language assistance is available **free of charge**:

- **Signage and Posters:** “Free Interpreter Services Available” displayed at entrances, reception, waiting areas, and exam rooms in the most common languages of the community.
 - **Verbal Notification:** Front desk staff and nurses inform patients at intake that interpretation and translation services are available.
 - **Written Notices:** Appointment reminders, intake packets, and consent forms include a multilingual statement about free language services.
 - **Digital Communication:** Clinic websites, patient portals, and text messaging systems display information about requesting interpreters or translated documents.
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2. Identifying Language Needs

- **Intake Forms:** Collect preferred spoken and written language at registration or check-in.

- **“I Speak” Cards & Posters:** Allow patients to point to their preferred language.
 - **Dialog One’s Direct Connect & DOVI Services:** Used when staff cannot identify the language, connecting immediately to a live interpreter for assistance.
 - **Ongoing Verification:** Confirm language preferences at follow-up visits and update records in the electronic health record (EHR).
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3. Providing Interpretation Services

Staff must never rely on family members, friends, or children to interpret, except in true emergencies. Professional interpreter services include:

- **On-Demand Phone/Video Interpreting (Direct Connect / DOVI):** Immediate access to interpreters in over 200 languages, available 24/7.
 - **Scheduled In-Person Interpreters:** For complex or sensitive interactions, including informed consent, surgical procedures, mental health counseling, and palliative care.
 - **ASL and VRI (Video Remote Interpreting):** For patients who are deaf or hard of hearing.
 - **Relay Services and CART (Captioning):** For patients with hearing, vision, or speech-related disabilities.
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4. Providing Translation of Documents

- **Vital Documents:** Consent forms, discharge instructions, privacy notices, billing statements, and treatment plans will be translated into the primary languages of the patient population.
- **Requests:** Staff submit translation requests through **Dialog One’s Translation Manager Platform**, which provides certified translators in any language.
- **Quick Translation for Emergencies:** Robocalls or urgent notices (e.g., outbreak alerts, clinic closures) can be immediately translated into multiple languages for rapid distribution.
- **Community Review:** Providers may invite bilingual community members or patient advocates to review translated materials for clarity and cultural appropriateness.

5. Emergency Communication Protocol

Healthcare providers must have a plan to communicate during emergencies such as:

- Disease outbreaks and public health announcements
- Natural disasters
- Facility closures (power outages, weather events)
- Security incidents

Protocol:

- Providers use **Dialog One's Quick Translation** to deliver multilingual robocalls, texts, and emails simultaneously.
- Families who call in for clarification are connected via **Direct Connect interpreters** in real time.
- Signage and digital platforms are updated immediately with translated instructions.

6. Complaint Process

- Patients may file complaints in **any language** (verbal, written, or electronic).
- Staff forward complaints to the **Language Access Coordinator** or file them through **Dialog One's customer support line**.
- Families are encouraged to use the **Direct Connect complaint line** to ensure accuracy.
- Complaints are acknowledged within **5 business days** and resolved within **30 days**, with written responses provided in the patient's primary language.

7. Staff Training & Responsibilities

- **Who Provides Services:** Only **professional interpreters, translators, and cultural specialists** (via Dialog One or trained bilingual staff authorized by the provider) may deliver language services.
 - **Who Should Not Provide Services:** Clinical staff, family members, or untrained bilingual employees may not serve as interpreters or translators in medical encounters.
 - **Annual Training:** All staff (front desk, nurses, doctors, billing, emergency response teams) receive training on:
 - Accessing interpreter/translation services
 - Recording language preferences in the EHR
 - Working effectively with interpreters
 - Patients' rights to free language services
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8. Quality Assurance

- All interpreters and translators will undergo periodic review to ensure accuracy, confidentiality, and compliance.
 - Providers may collect patient feedback on interpreter quality and incorporate findings into service improvements.
 - **Dialog One** will provide auditing, continuing education, and cultural competency training to healthcare staff.
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This guide can serve as a **universal template** for clinics, hospitals, dentists, chiropractors, and nurses. Each provider can adapt it by adding their own **workflow, points of contact, and service hours**.

Responding to Telephone Calls and In-Person Requests for Language Assistance

Healthcare providers must ensure that all patients, regardless of language ability or communication disability, can access services promptly and effectively.

Telephone Calls

- **Initial Response:** If staff identify that the caller has limited English proficiency, they will immediately connect to **Dialog One's Direct Connect service** to bring a qualified interpreter onto the call.
- **Language Identification:** If the caller's language is unclear, staff will use "I Speak" tools or Direct Connect to determine the correct language.
- **Documentation:** Staff will document the patient's language preference in the electronic health record (EHR) or scheduling system to avoid repeated barriers.
- **Patients with Disabilities:** For patients who are deaf, hard of hearing, or speech disabled, staff will connect through **relay services, TTY/TDD lines, or video relay service (VRS)**, depending on patient preference.

In-Person Requests

- **Front Desk / Reception:** If a patient arrives in person and requires assistance, staff will greet them respectfully and quickly arrange interpretation via **on-demand phone or video services (DOVI)**.
- **Scheduled Encounters:** For sensitive or high-stakes appointments (e.g., surgical consent, mental health, palliative care), staff will use the **self-serve scheduling platform** to request an in-person interpreter in advance.
- **Deaf, Deafblind, Hard of Hearing, or Speech Disabled Patients:**
 - **Video Remote Interpreting (VRI)** will be offered for immediate ASL support.
 - **On-site ASL interpreters or tactile interpreters** will be scheduled when advance notice is provided.
 - **Real-time captioning (CART)** will be available as needed.
- **Assistive Technology:** Screen readers, speech-to-speech relay, and augmentative communication tools will be made available for patients with communication disabilities.

Staff Training and Expectations

- All staff (front office, clinical, and support staff) will be trained annually to:
 - Recognize language and communication assistance needs,
 - Use Direct Connect and the DOVI platform for immediate interpreter access,
 - Contact scheduling staff for in-person or ASL interpreter requests,
 - Record patient language preferences in the EHR.
 - Staff are instructed to treat all requests with urgency, professionalism, and confidentiality. Services are always provided **free of charge** to patients and families.
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Here's a healthcare-focused draft for that section of the **Language Access Plan** — clear, compliance-oriented, and easy for clinics, hospitals, and independent providers to adapt:

Tracking and Recording Language Preferences

Healthcare providers must consistently record patient language preferences to ensure services are provided in the correct language at every point of care.

1. Initial Collection

- At registration or intake, staff will ask each patient to identify their **preferred spoken and written language** for medical discussions and documents.
- This information will also be collected during scheduling phone calls and emergency room admissions.
- Patients may also use **“I Speak” cards or posters** to indicate their language.

2. Electronic Health Record (EHR) Documentation

- The patient's preferred language will be entered into the **EHR** or scheduling platform.
- Language preference will be marked as a **permanent field** in the patient's chart and visible to all authorized staff.
- If a patient requires interpreter or translation services, a **“language access alert”** will be attached to their record.

3. Ongoing Updates

- Language preferences will be confirmed at every new encounter (appointments, hospital admissions, or urgent visits).
- If a patient changes their preferred language, staff will immediately update the record to reflect the new preference.

4. Verification and Quality Assurance

- Interpreter usage data from **Dialog One's Direct Connect and DOVI platforms** will be reviewed periodically to confirm patients are consistently receiving care in their preferred language.
- Reports will be generated at least twice per year to identify patterns and gaps.

5. Confidentiality and Compliance

- Language preference information will be treated as **confidential health information** under HIPAA.
 - Access to this information will be restricted to staff directly involved in patient care and communication.
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Identifying the Language Needs of Patients and Families

Healthcare staff will use consistent procedures to accurately identify the language needs of patients and families, ensuring that interpretation and translation services are provided in the correct language and dialect.

1. Registration and Intake

- At the first point of contact (scheduling, check-in, ER admission, or registration), staff will ask patients to state their **preferred spoken and written language**.
- Patients will also be asked if they require an interpreter for appointments or translated written materials.
- This information will be recorded in the **Electronic Health Record (EHR)** or scheduling system.

2. Use of “I Speak” Resources

- **“I Speak” posters and cards** will be available at reception desks and waiting areas, allowing patients to point to their preferred language.
- Staff will be trained to use these tools with sensitivity and without assumptions based on appearance or accent.

3. Dialog One Support

- When the language is uncertain, staff will connect to **Dialog One’s Direct Connect service**. Interpreters can quickly identify the spoken language and, if necessary, the dialect (e.g., distinguishing between **Mandarin vs. Cantonese** or **Somali vs. Maay Maay**).
- For written requests, staff may forward documents to **Dialog One’s Translation Manager Platform**, where professional translators will identify the language before processing the request.

4. **Ongoing Verification**

- Language preferences will be **confirmed at each patient encounter** to ensure accuracy, especially if patients' needs or household language use changes.
- Interpreter usage data from **Direct Connect and DOVI** sessions will be reviewed periodically to check that the correct language services are being used consistently.

5. **Training for Accuracy**

- All front-line and clinical staff will receive **annual training** on:
 - How to ask about and document language preferences,
 - How to use “I Speak” tools and Direct Connect,
 - How to recognize when dialect clarification is necessary.
 - Training will emphasize respect, confidentiality, and the importance of accuracy in medical settings.
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Responding to Correspondence from Patients with Language Assistance Needs

The clinic will ensure that all correspondence from patients with limited English proficiency (LEP) or communication disabilities is handled promptly, accurately, and respectfully.

Written Letters and Forms

- Any letter, intake form, or handwritten note received in a non-English language will be forwarded to the **Language Access Coordinator**.
- Staff will submit the document through **Dialog One's Translation Manager Platform** for certified translation into English.
- Responses will be prepared in the patient's **preferred language** and returned via mail, portal, or in person.

Voicemails

- If a voicemail is left in a language other than English, staff will forward the message to **Dialog One's Translation Manager Platform** for accurate translation.
- For urgent matters, staff may use **Direct Connect** to bring in an interpreter and return the patient's call immediately in their preferred language.
- For voicemails left in American Sign Language (ASL) via Video Relay Services (VRS), staff will respond using **VRI (Video Remote Interpreting)** or an in-person ASL interpreter as appropriate.

Emails and Patient Portal Messages

- Non-English emails or portal messages will be routed to the **Language Access Coordinator** for processing through **Dialog One's certified translators**.
- Routine messages may use pre-approved translated templates, but medical details and care instructions must always go through professional translation.
- Replies will be provided in the patient's preferred written language, ensuring accuracy and cultural appropriateness.

Tracking and Documentation

- All correspondence requiring language assistance will be logged in the **Electronic Health Record (EHR)**, noting the language used, the service accessed (Direct Connect, Translation Manager), and the date of the response.
- Documentation will ensure compliance with **Title VI of the Civil Rights Act** and **Section 1557 of the Affordable Care Act**.

Staff Training

- All front-desk, nursing, and clinical staff will be trained annually to:
 - Recognize correspondence requiring language services,
 - Forward letters, voicemails, and emails to the appropriate platform,
 - Use **Dialog One's Quick Translation** for time-sensitive public health announcements, and
 - Maintain confidentiality and professionalism when handling patient communications.
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Responding to Correspondence from Patients with Language Assistance Needs

The clinic will ensure that all correspondence from patients with limited English proficiency (LEP) or communication disabilities is handled promptly, accurately, and respectfully.

Written Letters and Forms

- Any letter, intake form, or handwritten note received in a non-English language will be forwarded to the **Language Access Coordinator**.
- Staff will submit the document through **Dialog One's Translation Manager Platform** for certified translation into English.
- Responses will be prepared in the patient's **preferred language** and returned via mail, portal, or in person.

Voicemails

- Voicemail messages in a non-English language will be forwarded to **Dialog One's Quick Translation service**.
- Quick Translation provides a rapid turnaround so staff can immediately understand the content of the voicemail.
- When necessary, staff will return the patient's call with the support of **Direct Connect interpreters** to ensure accurate two-way communication.

Emails and Patient Portal Messages

- Non-English emails or portal messages will also be processed through **Dialog One's Quick Translation service** for timely translation.
- Staff may use Quick Translation for shorter or time-sensitive communications, while critical or complex medical details will continue to be processed through **certified translation** to ensure accuracy.
- Replies will be sent in the patient's preferred written language, and copies will be documented in the patient's record.

Tracking and Documentation

- All correspondence requiring language assistance will be logged in the **Electronic Health Record (EHR)**, noting the language, service used (Quick Translation, Direct Connect, or certified translation), and the date of response.

Staff Training

- Staff will be trained annually on how to:
 - Forward voicemails and emails to **Quick Translation**,
 - Use **Direct Connect** for real-time follow-up calls,
 - Recognize when certified translation is required for medical or legal accuracy,
 - Maintain confidentiality and professionalism when handling patient communications.

Responding to Correspondence from Patients with Language Assistance Needs

The clinic ensures that all correspondence from patients with limited English proficiency (LEP) or communication disabilities is handled promptly, accurately, and respectfully.

Written Letters and Forms

- Any letter, intake form, or handwritten note received in a non-English language will be forwarded to the **Language Access Coordinator**.
- Staff will submit the document through **Dialog One's Translation Manager Platform** for certified translation into English.
- Responses will be prepared in the patient's **preferred language** and returned via mail, patient portal, or in person.

Voicemails and Emails

- Routine non-English voicemails or emails will be routed through the **Translation Manager Platform** for certified translation when needed.
- For urgent notifications or facility-wide updates, the clinic will use **Dialog One's Quick Translation service**, which enables **messages recorded in English to be immediately translated into multiple languages**.
- Quick Translation allows clinics, hospitals, and independent practices to send rapid robocalls, texts, or email blasts in patients' preferred languages when facilities must close early due to **snow emergencies, public health announcements, or other urgent situations**.
- For individualized follow-ups, staff may return calls using **Direct Connect interpreters** to ensure accurate two-way communication.

Tracking and Documentation

- All correspondence and notifications requiring translation will be logged in the **Electronic Health Record (EHR)** or clinic communication system, noting:
 - Language(s) used,
 - Service accessed (Quick Translation, Translation Manager, or Direct Connect),
 - Date and time of response.

Staff Training

- Staff will receive annual training on:
 - How to forward correspondence to the **Translation Manager Platform**,
 - How to activate **Quick Translation** for urgent outbound messages,
 - How to return calls with **Direct Connect interpreters**,
 - How to always maintain professionalism and confidentiality.
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Procuring In-Person Interpreter Services

The clinic acknowledges that certain medical situations necessitate face-to-face interpretation, particularly when sensitive health information, informed consent, or complex treatment planning is involved. Staff will follow these procedures to request and secure in-person interpreters:

1. Request Process

- When a patient or family indicates the need for an in-person interpreter, staff will log the request through **Dialog One's self-serve online scheduling platform**.
- Staff are instructed to submit requests as early as possible:
 - **3–4 business days** in advance for most spoken languages.
 - **2–3 weeks** in advance for American Sign Language (ASL) or less common languages.

2. Scheduling and Confirmation

- The scheduling platform connects directly with **Dialog One's Interpreter Manager system**, which assigns a qualified interpreter and provides confirmation back to the requested staff.
- Once confirmed, staff will notify the patient that an interpreter has been scheduled for their appointment or procedure.

3. Coverage and Availability

- In-person interpreters will be used for:
 - Informed consent discussions (surgery, procedures, medication risks).
 - Mental and behavioral health counseling.
 - Palliative care, end-of-life planning, and sensitive family meetings.
 - Disciplinary or compliance hearings in long-term care settings.
- If an in-person interpreter is not available on short notice, staff will use **Dialog One's Direct Connect (phone)** or **DOVI (video)** services to ensure no delay in care.

4. Documentation

- All interpreter requests will be recorded in the **Electronic Health Record (EHR)** or scheduling system.
- Documentation will include: the date/time requested, the language, the interpreter assigned, and confirmation that services were delivered.

5. Staff Training

- Staff will be trained annually on how to:
 - Submit in-person requests through the **self-serve platform**,
 - Confirm assignments with patients,
 - Use phone/video interpretation as a backup,
 - Maintain confidentiality and professionalism during interpreted encounters.

Procuring In-Person Interpreter Services

The clinic acknowledges that certain medical situations necessitate face-to-face interpretation, particularly when sensitive health information, informed consent, or complex treatment planning is involved.

1. Request Process

- All requests for **scheduled in-person interpreters** are conducted through the clinic's **self-serve online scheduling platform**.
- Staff will log into the platform, select the patient's language, appointment date/time, and location, and submit the request.
- Requests should be made as early as possible:
 - **3–4 business days in advance** for most spoken languages.
 - **2–3 weeks in advance** for American Sign Language (ASL) or less common languages.

2. Scheduling and Confirmation

- Once submitted, the request is routed to **Dialog One's scheduling system**, which assigns a qualified interpreter.
- The platform provides automatic confirmation back to the requested staff, who must notify the patient that an interpreter has been scheduled.

3. Coverage and Availability

- In-person interpreters will be used for critical medical interactions such as:
 - Informed consent for procedures or surgery,
 - Mental and behavioral health counseling,
 - Palliative or end-of-life care discussions,
 - Family care conferences and treatment planning.
 - If an in-person interpreter cannot be scheduled on short notice, staff must use **Dialog One's Direct Connect (phone)** or **DOVI (video)** services to avoid delays in patient care.

4. Documentation

- All interpreter requests and confirmations are automatically logged in the scheduling platform.
- Staff must also document interpreter use in the **Electronic Health Record (EHR)**, including the language requested, interpreter assigned, and date/time of service.

5. Staff Training

- Staff will receive annual training on:
 - How to access and submit requests through the **self-serve platform**,
 - How to confirm scheduled interpreters with patients,
 - When and how to use phone or video interpretation as a backup,
 - Professional expectations when working with interpreters.
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Language Assistance Services Offered by the Hospital/Clinic

The hospital/clinic is committed to providing high-quality, equitable healthcare by ensuring that all patients, regardless of their language or communication ability, have full access to medical services and information. Language assistance services are available **free of charge** to patients and their families.

Services Available

- **On-Demand Phone and Video Interpretation**
 - Access to qualified interpreters in over 200 languages, 24/7, through **Dialog One's Direct Connect and DOVI platforms**.
 - Ideal for urgent care, walk-in visits, intake, and follow-up phone calls.
- **Scheduled In-Person Interpreters**
 - Available for critical or sensitive appointments, such as informed consent, surgery discussions, mental health care, and end-of-life planning.
 - Requests are made through the **self-serve online scheduling platform**.
- **Written Translation of Vital Documents**
 - Patient rights forms, consent documents, treatment plans, discharge instructions, billing statements, and other essential materials are available in the patient's preferred language.
 - Requests are submitted through **Dialog One's Translation Manager Platform**, which provides certified translations.

- **Quick Translation for Emergencies**
 - The hospital/clinic uses **Dialog One’s Quick Translation service** to deliver urgent messages (e.g., clinic closures, public health alerts, severe weather) in multiple languages simultaneously.
 - **Services for Patients with Disabilities**
 - **American Sign Language (ASL) Interpreters** for in-person or video appointments.
 - **Video Remote Interpreting (VRI) and Video Relay Services (VRS)** for patients who are deaf or hard of hearing.
 - **Real-Time Captioning (CART)** for events or group sessions.
 - **Relay Services, Screen Readers, and Assistive Technologies** for patients who are deafblind, visually impaired, or speech disabled.
 - **Community Review and Cultural Support**
 - Dialog One’s cultural specialists may collaborate with community members to review translated materials and ensure they are culturally appropriate and easy to understand.
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How Patients Can Request Assistance

- **At Check-In or Registration:** Patients may tell any staff member that they need an interpreter or translated documents.
 - **By Phone:** Patients may request an interpreter when scheduling or calling about their care. Staff will connect through **Direct Connect** to bring an interpreter onto the call.
 - **Online:** Requests for in-person interpreters or translated documents can be made through the hospital/clinic’s **self-serve scheduling and Translation Manager platforms**.
 - **During Appointments:** Patients can request an interpreter or translated materials at any point during their visit.
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What Patients Can Expect

- All services are **provided free of charge** to patients and families.
 - Interpreters and translators are **qualified professionals**, trained in healthcare terminology and confidentiality standards (HIPAA).
 - Requests are handled promptly to avoid delays in care.
 - Patients will never be asked to rely on family members, children, or untrained staff to interpret.
 - Patients and families will be treated with **respect and dignity**, with communication provided in their **preferred language**.
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Emergency Communication Protocol

The hospital/clinic is committed to communicating **promptly, accurately, and respectfully** with patients and their families during emergencies. Clear communication in the patient's **preferred language** is essential to patient safety, continuity of care, and trust.

Situations Covered

- Critical changes in the health condition of a patient (including death notifications).
- Transportation delays or changes (e.g., ambulance transport, shuttle services, or scheduled patient pickups).
- Public health announcements (e.g., outbreaks, vaccination clinics, health advisories).
- Facility closures due to weather, power outages, or safety concerns.
- Other emergencies require rapid communication with patients or families.

Methods of Communication

- **Phone Calls & Robocalls:** Staff will use **Dialog One's Quick Translation service** to record a message in English and immediately deliver it in multiple languages to patients' families. This ensures urgent updates—such as health emergencies, closures, or public health alerts—are communicated simultaneously in all relevant languages.
- **Direct Calls with Interpreters:** For sensitive situations (e.g., death notifications or critical health status changes), staff will connect via **Dialog One's Direct Connect service** to ensure a professional interpreter is present during live conversations with families.

- **Text Messaging & WhatsApp:** The hospital/clinic may use secure text message systems or WhatsApp to send urgent updates in multiple languages, using Quick Translation to ensure clarity and consistency.
- **Emails & Patient Portals:** Urgent announcements will also be distributed through email or patient portals with multilingual translations attached.
- **On-Site Notifications:** If families are present at the hospital/clinic, staff will provide **in-person interpreters** when possible, or use **video remote interpreting (VRI)** for immediate communication.

Patients with Disabilities

- **ASL Interpreters, VRI, or VRS** will be provided for families who are deaf or hard of hearing.
- **CART (real-time captioning)** will be used for large group announcements or public sessions.
- **Screen readers and assistive technologies** will be enabled for digital messages.

Expectations for Families

- Families will receive emergency updates **free of charge** in their preferred language.
- Sensitive conversations (such as death notifications) will always be conducted with a **qualified interpreter present** to ensure compassion and accuracy.
- Families can expect timely communication through multiple channels so no patient or guardian is left uninformed.

Staff Training

- Staff will be trained annually on:
 - Using **Quick Translation** for mass emergency notifications.
 - Using **Direct Connect** for sensitive one-to-one calls.
 - Recording language preferences in the patient's record to ensure correct targeting.
 - Maintaining confidentiality and professionalism in all emergency communications.

Procuring Telephone or Video Interpretation Services

Healthcare providers must ensure that patients have immediate access to interpretation when in-person interpreters are not available or when urgent communication is required.

1. Accessing Services

- Patients could use the **Direct Connect service** to access phone interpreters on demand in preselected **languages, 24/7**.
- For video interpretation, clinic staff will log into the **Dialog One Virtual Identity (DOVI) platform**, which connects them to qualified phone/video interpreters, including **American Sign Language (ASL)** providers.

2. Procedure for Telephone Interpretation

- To connect to an interpreter, patients dial the **Direct Connect dedicated line**, or clinic staff can program their phone speed dial in the clinic/hospital phone system.
- Select the needed language from the menu or request help from the operator if the language is unknown.
- Conference the interpreter into the call to allow direct communication with the patient and/or family.
- Document interpreter usage in the **Electronic Health Record (EHR)**, noting the language, time, and purpose of the call.

3. Procedure for Video Interpretation

- Log in to the **DOVI platform** from a clinic computer, tablet, or secure mobile device.
- Select the required language (spoken or ASL) and connect to an interpreter within 30–60 seconds.
- Position the video device so that both patient and interpreter have clear visibility for effective communication.
- Record interpreter usage in the patient's EHR for compliance and quality tracking.

4. When to Use

- **Telephone:** For appointment scheduling, lab results, medication instructions, or when quick conversations are needed.
- **Video:** For encounters where body language, facial expressions, or **ASL** are essential—such as mental health counseling, informed consent, or sensitive discussions.

5. Staff Training

- All staff will be trained when needed on:
 - How to use the on-demand phone/video line, DOVI system.
 - How to determine whether phone or video interpretation is most appropriate.
 - The importance of using professional interpreters rather than family members, friends, or children.

Procuring Translation of Documents and Facilitating Review

The hospital/clinic ensures that all patients and families have access to written medical information in their preferred language. This includes vital documents such as consent forms, treatment instructions, patient rights, discharge summaries, billing statements, and public health notices.

Requesting Translation of Documents

- Staff who need a document translated will submit the request through **Dialog One's Translation Manager Platform**.
- The platform connects staff directly with professional translators who specialize in healthcare terminology and can provide **certified translations** in any language of choice.
- For urgent communications (e.g., public health alerts, sudden closures), staff may use **Dialog One's Quick Translation service** to translate messages into multiple languages for immediate distribution rapidly.

Translation Standards

- All translations are performed by **qualified linguists** trained in healthcare, confidentiality (HIPAA), and cultural sensitivity.
- Glossaries of medical terms and standardized templates will be maintained to ensure **consistency across translations**.

Community/Patient Review Process

- To ensure clarity and effectiveness, the clinic will invite **patient advocates, bilingual community members, or cultural specialists** to review translated documents periodically.
- Feedback on cultural relevance, clarity, and ease of understanding will be documented and incorporated into updates of glossaries and future translations.
- Dialog One's **cultural professionals** may also be engaged to lead review sessions and provide additional recommendations.

Distribution and Access

- Translated materials will be shared with patients in their preferred language and stored in the **Electronic Health Record (EHR)** or patient portal for easy access.
- Notices in common languages will be posted in waiting areas and available on the hospital/clinic's website.

Staff Training

- All staff will be trained annually on:
 - How to request document translations through the **Translation Manager Platform**,
 - When to use Quick Translation vs. certified translation,
 - How to communicate to patients that translated documents are available at no cost.

Procuring Translation of Documents and Facilitating Review

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Requesting Translation of Documents

- Staff who need a document translated will submit the request through **Dialog One's Translation Manager**.
- Requests are then scheduled through the Translation Manager. The **online platform** is designed to provide professional written translators who are waiting to capture your translation requirements and provide your staff with **certified translations** in any language of choice.
- For urgent communications (e.g., public health alerts, sudden closures), staff may use **Dialog One's Quick Translation service** to translate messages into multiple languages for immediate distribution.

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The hospital/clinic ensures that all patients and families have access to **written medical information** in their preferred language. This includes vital documents such as consent forms, treatment instructions, patient rights, discharge summaries, billing statements, and public health notices.

Requesting Translation of Documents

- Staff who need a document translated will submit the request through **Dialog One's Translation Manager Platform**.
- Requests are then scheduled through the platform, which is designed to provide professional written translators who are waiting to capture translation requirements and deliver **certified translations** in any language of choice.
- For urgent communications (e.g., public health alerts, sudden closures), staff may use **Dialog One's Quick Translation service** to translate messages into multiple languages for immediate distribution.

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- Feedback on cultural relevance, clarity, and ease of understanding will be documented and incorporated into updates of glossaries and future translations.
- Dialog One's **cultural professionals** may also be engaged to lead review sessions and provide additional recommendations.

Distribution and Access

- Translated materials will be provided to patients in their preferred language and stored in the **Electronic Health Record (EHR)** or patient portal for access.
- Notices in the most common languages will be displayed in waiting areas and made available on the hospital/clinic's website.

Staff Training

- All staff will be trained annually on:
 - How to request document translations through the **Translation Manager Platform**,
 - When to use Quick Translation vs. certified translation,
 - How to communicate to patients that translated documents are available at no cost.

Receiving and Processing Language Access Complaints

The hospital/clinic is committed to ensuring that all patients and families have equal access to care, regardless of language. To safeguard this right, the facility has established a clear process for receiving, documenting, and resolving language access complaints.

Receiving Complaints

- Patients, families, or community members may file a complaint **verbally, in writing, by email, voicemail, or through the facility's website/portal.**
- Complaints may be submitted in **any language.**
- Staff will either:
 - Contact **Dialog One's customer support** to file the complaint on behalf of the patient/family, or
 - Direct families to call the **Dialog One Direct Connect phone line**, which ensures the complaint is immediately understood and routed to the **Language Access Coordinator.**
- All front desk, clinical, and administrative staff will be trained to recognize and receive language access complaints.

Processing Complaints

- Complaints will be logged in a **secure tracking system** by the Language Access Coordinator.
- The coordinator will investigate by reviewing the situation, interviewing relevant staff, and arranging interpreter/translation support if clarification is needed.
- Findings will determine whether language services were denied, delayed, or inadequate, and corrective actions will be identified.

Response Timeline

- Patients/families will receive an **acknowledgment of the complaint within 5 business days.**
- A written resolution will be provided **within 30 calendar days** in the patient's **preferred language**, explaining findings and corrective actions taken.

Parent/Family Notification

- Families will be notified of the resolution in their **preferred communication channel** (letter, email, or phone with interpreter support).
- If a phone call is used, staff will connect through **Direct Connect interpreters** to ensure accuracy.
- Families will also be informed of their right to escalate unresolved complaints to **state health authorities, the U.S. Department of Health and Human Services (OCR), or other regulatory agencies.**

Staff Training and Accountability

- Staff will be trained annually on:
 - How to identify and escalate complaints,
 - How to document and route them through Dialog One or the Language Access Coordinator,
 - The importance of treating all complaints with urgency, professionalism, and confidentiality.
- The Language Access Coordinator will **review complaint data annually** to identify trends, gaps, and opportunities for service improvement.

Receiving and Processing Language Access Complaints

The hospital/clinic is committed to ensuring all patients and families have equal access to care, regardless of language. To safeguard this right, the facility has established a clear process for receiving, documenting, and resolving language access complaints.

Receiving Complaints

- **Complaints may be submitted in any language.**
- Staff will contact **Dialog One's customer support** to file the complaint on behalf of the patient or family.
- However, families or patients are encouraged to call the **Direct Connect phone line** to ensure complaints are understood and processed accurately with the **Language Access Coordinator.**
- **Front office staff and the Language Access Coordinator** will be trained to recognize and receive language access complaints.

Processing Complaints

- All complaints will be logged in a **secure tracking system** by the Language Access Coordinator.
- The coordinator will investigate by reviewing the situation, consulting with relevant staff, and arranging for interpretation/translation if clarification is needed.
- Findings will determine whether services were denied, delayed, or inadequate, and corrective actions will be taken.
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Response Timeline

- Families will receive an **acknowledgment of the complaint within 5 business days**.
- A written resolution will be issued **within 30 calendar days** in the patient's **preferred language**, explaining findings and any corrective actions.

Notification to Families

- Families will be notified in their **preferred communication method** (letter, email, or phone).
- Phone calls will be conducted with **Direct Connect interpreters** to ensure accuracy.
- Families will also be informed of their right to escalate unresolved complaints to **state health agencies or the U.S. Department of Health and Human Services (OCR)**.

Staff Training and Accountability

- Staff will be trained annually on how to file, forward, and document complaints.
- The Language Access Coordinator will **review complaint data annually** to identify patterns, address service gaps, and improve future delivery of language access services.

Healthcare Programs and Services Requiring Professional Interpreters

The hospital/clinic recognizes that accurate communication is critical to patient safety, informed decision-making, and quality of care. **Professional interpreters must be used**—and patients' family members, friends, or untrained staff may not serve as interpreters—except in true emergencies.

Required Use of Professional Interpreters

Professional interpreters (on-demand, video, or in-person) are required for:

- **Informed Consent Discussions** – before surgery, procedures, or treatment requiring signed consent.
- **Diagnosis and Treatment Explanations** – including discussions of prognosis, medical options, and risks/benefits.
- **Mental and Behavioral Health Services** – counseling, psychiatric evaluations, crisis intervention, and therapy sessions.
- **End-of-Life Care** – including palliative care, hospice planning, and advanced directive discussions.
- **Emergency Care** – when explaining emergency treatment, risks, or outcomes.
- **Discharge Instructions** – when giving aftercare, medication management, or follow-up appointment information.
- **Legal and Compliance Situations** – including guardianship decisions, patient rights discussions, and regulatory hearings.

Strongly Encouraged Use of Professional Interpreters

Professional interpreters are strongly encouraged by:

- **Primary Care Visits** – routine check-ups, immunizations, and follow-up visits.
- **Dental and Chiropractic Services** – when discussing procedures, treatment plans, or post-care instructions.
- **Patient Education Programs** – diabetes education, prenatal care, nutrition counseling, rehabilitation services.
- **Community Health Events** – screenings, health fairs, vaccination drives, and outreach activities.
- **Billing and Insurance Discussions** – when families need support understanding medical costs, payment options, or insurance coverage.

Supporting Services

- **Written Translation of Vital Documents** (consent forms, treatment instructions, discharge paperwork, patient rights).
- **ASL and Disability Communication Support** – American Sign Language (ASL) interpreters, Video Remote Interpreting (VRI), Captioning (CART), and relay services for patients who are deaf, deafblind, hard of hearing, or speech disabled.

Role of Dialog One Professionals in Supporting Language Assistance Services

The hospital/clinic partners with **Dialog One's professional interpreters, translators, and cultural specialists** to ensure that all language assistance services meet the highest standards of accuracy, confidentiality (HIPAA), and cultural sensitivity.

Interpreter and Translator Support

- **On-Demand & Scheduled Interpreters:** Provide phone, video, and in-person interpretation in over 200 languages, including American Sign Language (ASL).
- **Certified Translators:** Deliver written translations of vital documents (consent forms, treatment instructions, discharge paperwork, billing notices).
- **Proofreading and Quality Assurance:** Dialog One's translators review and proofread documents to ensure accuracy and consistency across materials.

Cultural Professionals

- Support the **community review process** to verify that translations are clear, culturally appropriate, and easily understood by patients and families.
- Provide **continuing education and training** for staff on cultural competency, best practices in working with interpreters, and respectful communication with multilingual communities.

Continuing Education and Standards

- All Dialog One linguists and cultural professionals complete **ongoing professional development** in healthcare terminology, confidentiality, and compliance requirements.
- The hospital/clinic benefits from Dialog One's **quality assurance system**, which includes audits of interpreter calls, translation accuracy checks, and patient feedback analysis.

Staff Authorization

- Only **Dialog One's professional interpreters, translators, and cultural specialists**, or hospital/clinic staff who have been formally trained and approved by the Language Access Coordinator, are authorized to provide language services.
- **Clinical staff, bilingual employees, or family members** may use their language skills to build rapport, but they are **not authorized** to serve as official interpreters or translators for medical encounters.
- **Patients, siblings, friends, or untrained staff** must **never** be used to interpret or translate.

Oversight and Accountability

- The **Language Access Coordinator** will oversee the use of Dialog One services, monitor compliance, and review patient feedback.
- Complaint and audit data will be used to improve processes and reinforce staff training.

Partnership Between Dialog One Professionals and In-House/Community Staff

The hospital/clinic values collaboration between **Dialog One's professional interpreters, translators, and cultural specialists** and the provider's own staff and community partners. This partnership ensures that patients and families receive both **professional-quality language services** and **culturally responsive support** from trusted individuals.

Collaborative Roles

- **Dialog One Professionals**
 - Provide certified interpretation (phone, video, in-person) and translation services for all critical patient communications.
 - Proofread and quality-check translated documents to ensure accuracy and compliance with healthcare standards (HIPAA, ACA, Title VI).
 - Facilitate cultural competency training and continuing education for clinical and administrative staff.
- **In-House and Community Partners** (e.g., family engagement specialists, health professionals, patient advocates, and support groups)
 - Work with Dialog One professionals to **review translated materials** for clarity, readability, and cultural appropriateness.
 - Offer contextual insights that improve patient engagement and understanding, while leaving the final translation/interpretation to be trained professionals.
 - Support families in navigating healthcare systems, paperwork, and care coordination while ensuring Dialog One interpreters are used for medical and legal discussions.

Approach to Collaboration

- Reviews and discussions will be framed as a **collaborative process** focused on what is most effective for patients, rather than determining “who is right or wrong.”
- Dialog One professionals and bilingual in-house staff will work together to ensure consistency and patient-centered communication.

Authorized vs. Unauthorized Staff

- **Authorized:** Dialog One professionals and any in-house staff formally trained and approved by the **Language Access Coordinator**.
- **Not Authorized:**
 - Clinical staff or bilingual employees who are **not certified or trained** to interpret/translate.
 - **Family members, children, or friends** of the patient, except in true emergencies.
 - Untrained staff using ad-hoc bilingual skills in place of professional services.
- Bilingual staff may use their language skills for **rapport-building and basic assistance**, but all **official interpretation and translation must be handled by Dialog One professionals**.

Oversight

- The **Language Access Coordinator** will oversee these partnerships, ensuring that staff and community collaborators support—without replacing—professional language services.
- Feedback from patient support groups and community partners will be incorporated into continuous quality improvement.

Language Access Proposal – At a Glance (Healthcare)

Category	Description / Action	Responsibility	Dialog One Support
Compliance	Blueprint aligns hospitals/clinics with state and federal language access requirements , addressing needs identified in the facility’s self-assessment.	Language Access Coordinator & Facility Administration	Provide compliance framework, documentation templates, and best practices.
Interpreter Services (On-Demand)	Access phone/video interpreters 24/7 for urgent or routine patient communication.	All staff interacting with patients/families	The Direct Connect & DOVI platforms provide immediate access to interpreters.
In-Person Appointments	Schedule qualified interpreters for critical or sensitive encounters (informed consent, mental health, end-of-life care).	Staff submit requests via a self-serve online platform	Manage scheduling, confirm assignments, and ensure coverage.
Written Translation	Translate vital documents (consent forms, discharge instructions, billing statements, patient rights, health alerts).	Staff submit requests through the Translation Manager Platform	Provide certified translators, proofreading, and QA.
Quick Translation (Emergencies)	Deliver immediate multilingual alerts (snow closures, public health emergencies, critical updates) via robocall, text, or email.	Front desk, admin staff, or emergency response teams	Quick Translation enables real-time outbound messaging in multiple languages.
Process Navigation	Standard workflow: request → assign → deadline → delivery → quality review.	Language Access Coordinator oversees the process	Track requests, monitor usage, and audit results.
Task Prioritization	Set deadlines, flag urgent vs. routine requests, and assign staff accordingly.	Clinical and admin staff	Support staff in identifying priority levels and turnaround times.
Personnel Roles	Identify staff responsible for requests, approvals, patient communication, and recordkeeping.	Language Access Coordinator, front desk, providers	Provide staff training to use the services correctly.
Quality Control	Ensure interpreters and translators meet standards; review patient feedback; audit compliance.	Language Access Coordinator & QA team	Provide auditing, community review, and improvement recommendations.
Staff Training	Train staff to access on-demand, scheduled, and translation services; ensure awareness of complaint process and compliance standards.	Coordinated by Language Access Coordinator	Dialog One delivers training sessions, e-learning modules, and ongoing support.

Last Updated, Date: September 23, 2025

Language Access Road Map for 2025–20210

Dear Healthcare Leadership / Staff / Stakeholders,

Clear and accurate communication is crucial for delivering safe, high-quality care. As your patient population grows more linguistically and culturally diverse, we must ensure that no individual is prevented from fully accessing medical services due to language or communication barriers. This **Language Access Proposal** provides a blueprint to bring your facilities into compliance with **state and federal language access requirements**. More importantly, it serves as a **roadmap for your staff**, outlining how to:

- Access on-demand telephone and video interpreters for immediate needs,
- Schedule in-person interpreters for critical or sensitive encounters,
- Request certified written translations of vital medical documents,
- Use Quick Translation for urgent emergency announcements,
- Set deadlines, prioritize tasks, and assign responsibilities, and
- Maintain quality control for all language assistance services.

Through our partnership with **Dialog One Language and Cultural Solutions**, staff will receive training on how to access these services and ongoing support to ensure smooth implementation. Dialog One's platforms, including **DOVI = 200 + On-Demand Phone and Video Interpreters, Direct Inbound Connect, and the Written Translation Manager Platform**. It'll equip you with the tools you need to communicate effectively with your patients and families in their preferred language/cultural needs.

By implementing this plan, together we strengthen our commitment to **providing equitable, patient-centered care, ensuring that every patient and their family have** the information they need to make informed decisions about their health.

I appreciate your dedication to building a more inclusive healthcare environment. Together, we will create a system where every patient feels heard, respected, and supported.

Sincerely,

Roberto D. Fonts, Dialog One, LLC, President and CEO

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