LANGUAGE ACCESS PLAN

August 2024
# Table of Contents

OVERVIEW ............................................................................................................................................ 3
LANGUAGE ACCESS POLICIES AND GOALS .................................................................................. 3
ONC LANGUAGE ACCESS PLAN – KEY ELEMENTS ................................................................. 5
   Element 1: Assessment and Needs Capacity .............................................................................. 5
   Element 2: Interpretation Language Assistance Services ....................................................... 6
   Element 3: Written Translations ................................................................................................. 6
   Element 4: Policies, Procedures, Practices ............................................................................... 7
   Element 5: Notification of the Availability of Language Assistance at No Cost ............... 8
   Element 6: Staff Training ........................................................................................................ 9
   Element 7: Assessment & Accountability: Access, Quality, Resources, Reporting ......... 10
   Element 8: Consultations with Health Care and Human Services Partners .................. 10
   Element 9: Digital Information ................................................................................................. 11
   Element 10: Grant Assurance and Compliance by Recipients of HHS Funding .......... 12
APPENDIX: ....................................................................................................................................... 14
   Definitions ................................................................................................................................. 14
OVERVIEW

The Office of the National Coordinator for Health Information Technology (ONC) is at the forefront of the Administration’s health Information Technology (health IT) efforts and is a resource to the entire health system to support the adoption of health information technology and the promotion of nationwide, standards-based health information exchange to improve health care. ONC is organizationally located within the Office of the Secretary for the U.S. Department of Health and Human Services (HHS).

ONC is the principal federal entity charged with coordination of nationwide efforts to implement and use the most advanced health information technology and the electronic exchange of health information. The position of National Coordinator was created in 2004, through an Executive Order, and legislatively mandated in the Health Information Technology for Economic and Clinical Health Act (HITECH Act) of 2009. ONC’s mission is to create systemic improvements in health and care through the access, exchange, and use of data.

Through its work, ONC remains focused on two strategic objectives: 1) advancing the development and use of health IT capabilities; and 2) establishing expectations for data sharing.

LANGUAGE ACCESS POLICIES AND GOALS

ONC is committed to providing language assistance\(^1\) about its programs and policy initiatives to individuals with Limited English Proficiency (LEP). This Plan applies to all ONC offices. ONC leadership will ensure that all offices understand and can implement the policies and procedures of this Plan. This LAP is designed to ensure meaningful access for individuals with LEP to programs and activities administered and funded by ONC in accordance with Title VI of the Civil Rights Act and Section 1557 of the Affordable Care Act, Executive Orders 13166, 13985, 13995, 14031, and 14091, and the HHS Equity Action Plan issued in April 2022. Collectively, these authorities set overarching goals for HHS and ONC to improve access to its programs and activities for persons with LEP and ensure that entities funded by ONC also take reasonable steps to provide meaningful access for persons with LEP. To fulfill our commitment, ONC will:

- Complete a comprehensive needs assessment for our health IT community to understand the scope of language assistance needs for our constituency;
- Develop appropriate policies and procedures that balance language assistance needs with cost effective resources to meet those needs;
- Implement ongoing training for relevant staff to recognize language assistance needs and to work within our policies and procedures to provide assistance on an as needed basis; and

\(^1\) Refer to the Appendix for LAP definitions, and also to the [HHS-wide LAP](#) for definitions of all terminology.
• Monitor language assistance services provided by ONC to evaluate feasible options for permanent service and/or program development/changes to meet the information needs of individuals with limited English proficiency.
ONC LANGUAGE ACCESS PLAN – KEY ELEMENTS

Element 1: Assessment and Needs Capacity

Each year, ONC will assess the extent that language assistance or in-language material was requested and/or accessed or otherwise needed by customers, and/or other health care and human services partners, and estimate the resources needed to meet anticipated language assistance needs for the coming year.

Members of the health IT community can make a language access request in one of two ways:

1) Via email at onc.request@hhs.gov

2) Via the Health IT Feedback Form at https://inquiry.healthit.gov/support/plugins/servlet/desk.

As part of the needs assessment, ONC will establish a few questions, to identify and assess the language assistance needs for the health IT community.

The Division of Public Affairs and Communications (DPAC) will be responsible for the overall implementation, monitoring, and updating of our Language Access Plan.

ONC will, on an ongoing basis, assess the language assistance needs of the current and potential health IT community to inform policy, processes, and budgeting necessary to increase awareness of and implement language assistance services that increase access to respective programs, activities, and services for persons with LEP.

Steps ONC will take:

- LAP Listening Session: Each year, ONC will participate in at least one listening session to learn about challenges and opportunities for improvement in the agency’s language access efforts and consult subject matter experts within HHS to determine whether the agency’s current language access program is effective and complies with Section 1557 of the Affordable Care Act, as well as this Language Access Plan (LAP).

- Participate in at least one inter- and/or intra-agency language access working group led by the Office for Civil Rights (OCR) to identify methods for improving agency proficiency in providing language assistance services.

- Take specific steps to develop or amend policies or practices that ensure that ONC’s language assistance services are adequate to meet customer needs and advise ONC leadership on updating ONC’s LAP as needed.
Element 2: Interpretation Language Assistance Services

Based on the results of the needs assessment, ONC will evaluate the need for interpretation language assistance services for the health IT community.

ONC maintains a recorded phone line that lists options for individuals to connect directly with all ONC offices. This number, (202) 690-7151, is listed on the ONC website under the “Contact Us” section.

Steps ONC will take:

- ONC leadership will identify staff to serve as the established points of contact to coordinate all interpretation service requests. ONC’s size and limited resources dictate that interpretation language services be provided through one, centralized point of contact, which will be our Division of Public Affairs and Communications (DPAC).
- Develop methods for tracking and reporting the number of requests for interpretation services, the type of interpretation requested, the languages requested, and the response time in which interpretation was provided.
- Identify and recruit a contractor to provide interpretation language assistance as needed.
- Submit a budget annually (as needed and appropriate) for message dissemination to raise awareness of available interpretation services.

Element 3: Written Translations

Based on the results of the LAP listening session and needs assessment, ONC will evaluate the written translation needs for the health IT community as identified above in Element 1.

As needed, ONC will take reasonable steps to provide accurate written translations to ensure meaningful access to and an equal opportunity to receive timely public health and social services information and participate fully in the services, activities, programs, or other benefits administered by the agency as described in Element 1.

ONC will translate vital documents or other critical public information (especially during public health emergencies) based on their respective assessments of need and capacity and develop translation strategies suitable to the medium for distribution. Translated documents would be developed to be easy to understand by intended audiences. Matters of plain language, cultural communication, and health literacy will be considered for all documents, including when originally composing in English. Materials that are translated, will be easily accessible on the agency’s website.

The health IT community can make a request in one of two ways:

1) Via email at onc.request@hhs.gov
2) Via the health it feedback form at https://inquiry.healthit.gov/support/plugins/servlet/desk

Steps ONC will take:

ONC leadership will identify staff to serve as the established point of contact to provide access to written translation services, on an as needed basis to our health IT community. ONC’s size and limited resources dictate that written translation services be provided through one, centralized point of contact.

- Designate an office or individual responsible for developing a program that ensures individuals participating or attempting to participate in programs and activities funded or administered by ONC are provided written language assistance services in accordance with the agency’s needs, capacity, assessment, and this Plan.
- Continue to monitor the above channels closely for any language requests for ONC materials.
- As needed, offer translated written materials in other formats such as audio, video with subtitles, video with sign language, infographics, etc., for persons with limited literacy or disabilities, and for those whose language does not have a written form.
- All online translated content shall comply with Section 508 of the Rehabilitation Act.

Element 4: Policies, Procedures, Practices

Using the result of our needs assessment and LAP Listening Session, ONC will review, on a program and service specific basis, the level of need for both oral and written translation services. Once ONC has a clear understanding of language assistance needs by program, appropriate policies, and procedures to provide immediate and long-term translation services will be developed, implemented, and monitored by ONC leadership.

ONC must establish and maintain an infrastructure designed to implement and improve language assistance services within the agency. The results of the assessment from Element 1 will be used to inform the development of policies, procedures, and practices appropriate for the agency to promote accessibility for individuals with LEP they serve or are likely to serve.

Steps ONC will take:

- Designate an office or individual responsible for developing and implementing written language access policies and procedures to ensure each element of the HHS Language Access Plan is implemented in ONC’s respective programs and activities, including during public health emergencies.
- Participate on at least one inter- and/or intra-agency working group that is focused, at least in part, on identifying and implementing effective practices for
improving access for persons with LEP. The designated office or individual will propose effective practices to the agency head to ensure policies and procedures are effectively administered.

- Continually collect and share metrics to monitor implementation and efficacy of the Plan.

Element 5: Notification of the Availability of Language Assistance at No Cost

ONC will proactively inform individuals with LEP that language assistance services are available at no cost through our external facing communication tools including but not limited to, HealthIT.gov, social media programs and federal advisory committee public notices. Metrics will be monitored and analyzed on an ongoing basis to assess need and ensure ONC is meeting language assistance needs of the health IT community.

ONC will take reasonable steps to ensure meaningful access to programs and activities by persons with LEP, including notifying persons with LEP who are part of the health IT community, about the availability of language assistance at no cost. The results from the Element 1 assessment will be used to inform ONC on this task.

Steps ONC will take:

- Designate an office or individual responsible for developing and implementing an agency strategy for notifying individuals with LEP and people with disabilities who contact the agency or are being contacted by the agency, that language assistance is available to them at no cost.

- Distribute and make available resources, such as the Department’s Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons (HHS LEP Guidance) and Federal Plain Language Guidelines, directly or over the internet to all current recipients, providers, contractors, and vendors.

- Provide training and technical assistance, as needed, to make entities funded by HHS aware that language assistance services provided in order to comply with Title VI and Section 1557 must be provided at no cost to those in need of language assistance services.
Element 6: Staff Training

ONC will commit resources and provide employee training as necessary to ensure leadership and staff understand and can implement the policies and procedures of this Plan and the HHS Language Access Plan. HHS and agency-designed training will also ensure all ONC employees have access to formative information and training opportunities that support their capacity and capability to provide meaningful communication to individuals with LEP.

The staff training will include the following components:

- The Department and agency’s legal obligations to provide language assistance services.
- Department and agency language access resources and designated points of contact.
- Identifying the language needs of an LEP individual.
- Requesting documents for translation.
- Accessing and providing language assistance services through contracted personnel.
- Tracking the use of language assistance services.
- Tips on providing meaningful assistance to LEP individuals.
- How to request translation and interpretation services.
- How the public can request services or file a complaint.

Online training may also be made available to all employees on a regular basis.

Steps ONC will take:

- Designate an office or individual responsible for developing, implementing, and committing resources necessary to train agency-designated employees to implement elements of this Plan that address delivery of language assistance services.
- Develop a process that ensures overall employee awareness of the both the ONC and the HHS Language Access Plan.
- Determine which staff members should receive training in the provision of language assistance services and related policies, procedures, and effective practices.
- Notify employees that ONC provides language assistance and inform employees on how to provide assistance or otherwise contact the office or individual responsible for ensuring the provision of language assistance services.
- Develop a dedicated resource webpage in the intranet that can serve as a repository of Standard Operating Procedures, guidance documents, materials, training opportunities, etc. We will also link to the HHS Language Access Plan.
Element 7: Assessment & Accountability: Access, Quality, Resources, Reporting

To increase availability and quality of language assistance services, ONC will designate an office or individual to establish an infrastructure to annually assess ONC language assistance program and make recommendations for improvements. Specifically, the designated office or individual will assess the efficacy and availability of services provided to individuals with LEP and people with disabilities.

ONC will work with its staff to proactively evaluate language assistance access needs based on web and social media analysis as well as language assistance requests from our FACA committees.

Additionally, ONC will consult with the Office of Minority Health to research audience needs to implement culturally sensitive and appropriate documents that cater to the audience.

Steps ONC will take:

- Designate an office or individual responsible for developing, implementing, and committing resources necessary to regularly monitor and annually assess relevant practices and procedures, focusing on progress made by ONC to improve and ensure the quality and accuracy of language assistance services provided to individuals with LEP and people with disabilities, while also addressing challenges.

- Implement an agency process to annually report to the Language Access Steering Committee on agency progress implementing each element of this Plan, effective practices, and barriers to improving the language access program, in accordance with the Language Access Steering Committee reporting timelines.

- Address, in accordance with policies and procedures developed under Element 4, complaints received regarding language assistance services and products, or other services provided by the agency, in a timely manner, and retain a record of any resolution of such complaints. Whenever feasible, resolutions and agreements will be made public on https://www.healthit.gov.

Element 8: Consultations with Health Care and Human Services Partners

ONC can obtain important information and insight from health care and human services partners with an existing relationship. This information may be critical for conducting needs assessments, capacity, and accessibility under Elements 1 and 7. Health care and human services partners can provide agencies with qualitative and first-hand data on the needs of their current and potential individuals with LEP.

ONC will take the initiative and actively seek out opportunities to engage with health care and human services partners.
Steps ONC will take:

- Designate an office or individual responsible for identifying and developing opportunities to include health care and human services partners in the development of policies and practices that enhance access to agency programs and activities for persons with LEP and people with disabilities.
- Share HHS and ONC Language Access Plans and resources with health care and human services partners in an accessible manner and solicit their feedback.
- Participate annually in at least one listening session, whether hosted by a particular agency or HHS, to learn about challenges and opportunities for improvement in the agency’s language access program.
- Post this Language Access Plan and resources on agency websites in accessible formats, as well as contact information to receive questions and comments.

Element 9: Digital Information

ONC’s digital information consists of a dedicated web site (www.HealthIT.gov) and a comprehensive social media program. Language Access policies and procedures will be developed for our digital platforms to ensure that language access needs are being monitored and actions taken to meet the health IT community’s needs.

To help ensure individuals with LEP have digital/online access to in-language program information and services, and to help ensure they are aware of and can obtain language assistance needed to access important program information and services, ONC will designate an office or individual responsible for and capable of establishing and maintaining an infrastructure that effectively distributes in-language information online in a manner that promotes meaningful access for individuals with LEP.

Steps ONC will take:

- Designate an office or individual responsible for and capable of establishing and maintaining an infrastructure that effectively distributes (as needed) in-language information online in a manner that promotes meaningful access for individuals with LEP, and regularly monitor efficacy, quality, readability, and accessibility of translated materials.
- Notify visitors with LEP to HHS webpages that language assistance is available at no cost in alignment with the action steps outlined in Element 5, including multilingual technical support and alternatives for individuals who cannot navigate digital spaces.
- Serve on at least one inter- and/or intra-agency working group that focuses in part on making government websites more accessible to persons with LEP in multiple languages and people with disabilities through various multimedia formats.
- Use and promote the resources on www.lep.gov by providing links to the LEP.gov website on agency and program websites.
• Leverage HHS digital policies and U.S. Web Design Standards for guidance on multilingual display and options: https://designsystem.digital.gov/components/languageselector/.

• Develop procedures for creating, posting, and updating multilingual web content, digital materials, and social media posts that are accessible to all audiences.

**Element 10: Grant Assurance and Compliance by Recipients of HHS Funding**

For all remaining grants and cooperative agreements issued by ONC, ONC will ensure that our grantees understand and comply with their obligations under the civil rights statutes and regulations enforced by HHS to ensure language access. ONC will provide all grantees with relevant background information about language access requirements. The grant review process will be modified to include a language access compliance and success measure effective immediately.

Recipients of federal funds must comply with federal civil rights laws and provide written notice of their legal obligation and compliance with regulations as they relate to language access. Program reviews can present opportunities for reviewers to determine if recipients are complying with program and civil rights regulations. To help ensure recipients of HHS funding meet their program and civil rights obligations, civil rights guidance and increased compliance monitoring will be included in grant announcements, requirements, and policies. Complaints will be addressed in a timely and reasonable manner.

**Steps ONC will take:**

• Designate an office or individual responsible for working with the Assistant Secretary for Financial Resources (ASFR) or the relevant budget office and ensure 1) development of a mechanism for funding language assistance services provided by recipients; and 2) establishment of a reasonable schedule for providing language assistance services funding depending on the recipient’s size, service population, and capacity for covering costs for language assistance services through non-federally funded resources.

• Designate an office or individual responsible for ensuring recipients: 1) are aware of their language access obligations under Title VI and Section 1557; 2) have plans for serving persons with LEP and persons with disabilities that ensure their programs and activities are capable of complying with the assurances they give in exchange for HHS funds; 3) understand the process for including budget lines in their proposals for providing language assistance services; 4) annually report the amount and type of language assistance services provided to their customers and the languages in which the services were provided; 5) receive, resolve, and document complaints in a timely manner; and 6) follow guidance and technical assistance provided by the agency.

• In consultation with the grants office, develop and incorporate LEP requirements or best practices in funding opportunity announcements, e.g., requiring applicants to submit language access procedures or policies with their applications, providing
notices of the availability of language assistance services at no cost, providing vital program documents in the top languages spoken by the communities they serve, including budgets in their applications to provide language assistance services, demonstrating the ability to serve communities with LEP and people with disabilities, etc.

- Train agency staff who communicate with HHS-funded entities about the requirements of Title VI and Section 1557 and offer training resources to promote awareness of the HHS LEP Guidance. Ensure agency program staff can make current and prospective recipients of agency funds aware of their obligations under federal civil rights statutes and regulations, especially obligations under Title VI and Section 1557 with respect to LEP accessibility, including ensuring persons with LEP can utilize language assistance services.
APPENDIX:

Definitions

**Note**: Any related definitions that may be issued under Section 1557 will complement or supersede the broad working definitions set forth below.

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Agency</strong></td>
<td>Agency refers to HHS Operating Divisions (such as CDC, FDA or NIH) and Staff Divisions (such as the Office for Civil Rights or the Office of the Assistant Secretary for Public Affairs). Operating Divisions focus on specific programs and activities as authorized by Congress. Staff Divisions are part of the Office of the Secretary and serve in a coordinating role for the Department.</td>
</tr>
<tr>
<td><strong>Applicant</strong></td>
<td>Any person who inquires about or submits an application for public assistance benefits under any program or service.</td>
</tr>
</tbody>
</table>
| **Bilingual/Multilingual Staff**  | A staff member who has advanced proficiency (e.g., proficiency at or above the Federal Interagency Language Roundtable (https://www.govtilr.org/) level 3 in listening, reading, and speaking or above the American Council on the Teaching of Foreign Languages “Superior” level in listening, reading, and speaking)) in English and at least one other language and has knowledge of and experience with specialized terminology necessary for meaningful communication. A staff member who only has a rudimentary familiarity with a language other than English shall not be considered Bilingual/Multilingual Staff.  

   Bilingual/Multilingual Staff should not interpret or translate unless they have separately met the requirements of being a qualified interpreter or translator. Bilingual/Multilingual Staff must be given clear roles and expectations regarding whether they are performing their job duties in-language or serving as qualified interpreters or translators.  

   A distinction should be made between Bilingual/Multilingual Staff who provide services directly in a non-English language (e.g., call center staff) and those who interpret, as the assessment and skills required for each differ. |
<p>| <strong>Contractor</strong>                    | Any entity that performs work or provides services on behalf of an agency or division under a contractual agreement with reimbursement.                                                                      |
| <strong>Customer</strong>                      | Individuals, businesses, and organizations that interact with an HHS agency or program. The term customer is inclusive of |</p>
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>beneficiaries and interested parties.</td>
<td></td>
</tr>
<tr>
<td>Digital Information</td>
<td>Information, as defined in OMB Circular A-130, which the government produces and provides digitally to help individuals access HHS conducted programs and activities for which they are individually eligible to participate. OMB Circular A-130 defines digital information as any communication or representation of knowledge such as facts, data, or opinions in any medium or form, including textual, numerical, graphic, cartographic, narrative, or audiovisual forms.</td>
</tr>
<tr>
<td>Interested Party</td>
<td>Beneficiaries, including recipients of federal financial assistance, vendors, advocacy groups, non-governmental organizations, and representatives from a broad cross-section of the language access community, individuals with disabilities, etc.</td>
</tr>
<tr>
<td>Interpretation</td>
<td>The act of listening, understanding, analyzing, and processing a spoken communication in one language (source language) and then faithfully orally rendering it into another spoken language (target language) while retaining the same meaning. For individuals with certain disabilities that affect communication, this can include understanding, analyzing, and processing a spoken or signed communication in the source language and faithfully conveying that information into a spoken or signed target language while retaining the same meaning.</td>
</tr>
<tr>
<td>Language Access</td>
<td>Is achieved when individuals with LEP have meaningful access to and can communicate effectively with HHS employees and contractors and participate in HHS programs and activities.</td>
</tr>
<tr>
<td>Language Assistance</td>
<td>All oral, written, and signed language services needed to assist individuals with LEP and people with disabilities to communicate effectively with HHS staff and contractors and gain meaningful access and an equal opportunity to participate in the services, activities, programs, or other benefits administered by HHS.</td>
</tr>
<tr>
<td>Limited English Proficiency (LEP)</td>
<td>An individual who does not speak English as his or her preferred language and who has a limited ability to read, write, speak or understand English in a manner that permits him or her to communicate effectively with HHS and have meaningful access to and participate in the services, activities, programs, or other benefits administered by HHS. Individuals with LEP may be competent in English for certain types of communication (e.g., speaking or understanding), but have limited proficiency in English in other areas (e.g., reading or writing). LEP designations are also context-specific; an individual may possess sufficient English</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>language skills to function in one setting (e.g., conversing in English with coworkers), but these skills may be insufficient in other settings (e.g., addressing court proceedings). An individual who is D/HOH may also have limited proficiency in spoken or written English and may not be proficient in ASL or any other recognized sign language.</td>
<td></td>
</tr>
<tr>
<td>Meaningful Access</td>
<td>Language assistance that results in accurate, timely, and effective communication at no cost to the individual with LEP needing assistance. Meaningful access denotes access that is not significantly restricted, delayed, or inferior as compared to programs or activities provided to English-proficient individuals.</td>
</tr>
<tr>
<td>Participant</td>
<td>Any person who has applied for and is receiving public assistance benefits or services under any HHS program or service.</td>
</tr>
<tr>
<td>Plain Language</td>
<td>Plain language as defined in the Plain Writing Act of 2010 is writing that is “clear, concise and well organized.”</td>
</tr>
<tr>
<td>Qualified Interpreter or Translator</td>
<td>A bilingual/multilingual person who has the appropriate training and experience or demonstrated ability to fully understand, analyze, and process and then faithfully render a spoken, written, or signed message in one language into a second language and who abides by a code of professional practice and ethics. A child shall not be considered a qualified translator or interpreter, nor shall a family member or employee who does not meet the minimum qualifications specified above.</td>
</tr>
<tr>
<td>Sign Language</td>
<td>Method of communication for people who are deaf or hard of hearing in which hand movements, gestures, and facial expressions convey grammatical structure and meaning. There is no universal sign language. Different sign languages are used in different countries or regions. For example, British Sign Language (BSL) is a different language from ASL, and Americans who know ASL may not understand BSL.</td>
</tr>
<tr>
<td>Translation</td>
<td>The process of converting written text from a source language into an equivalent written text in a target language as fully and accurately as possible while maintaining the style, tone, and intent of the text, while considering differences of culture and dialect.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
</tr>
<tr>
<td>--------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Vital Document</td>
<td>Paper or electronic written material that contains information that is critical for accessing a component’s programs or activities or is required by law. Vital documents include, but are not limited to: critical records and notices as part of emergency preparedness and risk communications; online and paper applications; consent forms; complaint forms; letters or notices pertaining to eligibility for benefits; letters or notices pertaining to the reduction, denial, or termination of services or benefits that require a response from an individual with LEP; written tests that evaluate competency for a particular license, job, or skill for which knowing English is not required; documents that must be provided by law; and notices regarding the availability of language assistance services for individuals with LEP at no cost to them.</td>
</tr>
</tbody>
</table>