

Office of Language Access
Instructions for Language Access Reporting Tool for State Agencies

General Instructions: For each category, record (1) the Total for the column on the top line; and (2) the number of type of service provided, type of oral language service utilized, etc. for each language. The numbers at the top of each column refer to the six categories of data covered by this Reporting Tool. These six categories of data apply to the languages listed. Please report data in each category for each language encountered, as applicable.

CATEGORIES:

<u>Category</u>	<u>Column Title (on the Reporting Tool)</u>
(1)	Division/Office (page 1) or Language (page 2)
(2)	# of LEP Encounters
(3)	Type of Services Provided to LEP Customers (#)
(4)	Type of Oral Language Service Utilized (#)
(5)	# of Documents Translated
(6)	Language Services Expenditures (\$)

REPORT DUE DATES:

<u>Semi-Annual Report</u>	<u>Report Due Date</u>
1 st Semi-Annual (July- Dec.)	March 31
2 nd Semi-Annual (Jan.-June)	September 30

User Log. The User Log for LEP Services is an example log provided for your convenience and is not to be turned into to the OLA; there are no instructions for the User Log, other than the example provided on the log itself.

DEFINITIONS (for purposes of this Reporting Tool):

- *Interpreter* means a person who is trained in interpretation and has proficient knowledge and skills in English and at least one other language and who uses those skills and training to make possible communication in one language by orally converting what is said to another language while retaining the same meaning.
- *Interpretation* means the oral rendition of a spoken message from one language to another, preserving the intent and meaning of the original message.

- *Sight translation* is where an interpreter reads written text and orally converts what is written to another language while retaining the same meaning.
- *Translate* means to convert written materials from one language into an equivalent written text in another language while maintaining the same coherence and meaning.
- *Translation* means an activity comprising the interpretation of the meaning of a text in one language and the production, in another language, of a new, equivalent text.

Each TERM has a corresponding INSTRUCTION. The Terms are listed in alphabetical order. In addition, below each Term in parentheses is a cross reference to help you find the location of the Term on the Reporting Tool.

TERM	INSTRUCTION
# of Documents Translated (5)	This category measures the number of documents translated this quarter by or for your Department or Agency.
# of LEP Encounters (2)	This category measures the total number of times an LEP customer seeks to access the Department/Agency's services, programs and activities. Each visit is an encounter. Thus, if the same Chuukese Customer visits the Department twice in one day, that counts as two encounters for the Chuukese tally.
% of Total (3 rd row)	<p>This percentage applies to categories 3 to 6 (<i>See General Instructions</i> above for the categories).</p> <p>For each subcategory within these categories, record the percentage of subcategory total out of the total number for that category. If none, please enter "0". For example, in category 4, Type of Oral Language Service Utilized, if the total number of services provided to LEP Customers by Volunteer Staff is 10 and the Total Number of Type of Oral Language Service Utilized is 50, then the % of Total for Volunteer Staff is 20%:</p> $\frac{\text{Volunteer Staff}}{(\text{Totals for: Contracted Interpreter (Agency) + Contracted Interpreter (Directly) + Telephone Interpreter + Volunteer Staff + Other})} = \frac{10}{50} \times 100 = 20\%$
Amount (Total \$) (6, Language Services Expenditures)	<p>Total dollar amount a Department/Agency spent on language access services, according to the type of language service. For lump sum or lag reporting, see <i>Language Service Expenditures (\$)</i>.</p> <p>If none, please enter "0". If left blank, this means that no money was spent on language services.</p>
Bilingual Staff (4, Type of Oral Language Service Utilized)	<i>Bilingual staff</i> is a person who (a) is employed by the State of Hawaii; (b) can communicate fluently in English and in one or more other languages with varying degrees of proficiency; and (c) provides direct services, information or assistance in another language. (<i>continued . . .</i>)

	Record the total for each language and then add them up to get the total number. If none, please enter "0".
Community Volunteer	<p>A Community Volunteer is a person who (a) volunteers with a community-based organization that has agreed to provide language services for the Department/Agency on a volunteer basis; (b) is trained in the information or services of the program; and (c) is able to communicate directly with LEP persons in the LEP person's language.</p> <p><u>Warning:</u> Community Volunteers should be competent in the skill of interpreting; and knowledgeable about applicable confidentiality and impartiality ethics.</p> <p>Record the total for each language and then add them up to get the total number. If none, please enter "0".</p>
Contact Person (top of the Tool)	First and Last Names of the person from your Department/Agency who is responsible for the completed Language Access Reporting Tool for your Department/Agency.
Contracted Interpreter (via an Interpreter Agency) (4, Type of Oral Language Service Utilized)	<p>An Interpreter who works for an interpreter entity that the Department/Agency hired by contract to provide interpretation services. <i>See</i> DEFINITIONS (on page 1) for definition of <i>Interpreter</i>.</p> <p>Record the total for each language and then add them up to get the total number. If none, please enter "0".</p>
Contracted Interpreter (Directly) (4, Type of Oral Language Service Utilized)	<p>An Interpreter who has entered into a contract directly with your Department/Agency to provide interpretation services. <i>See</i> DEFINITIONS (on page 1) for definition of <i>Interpreter</i>.</p> <p>Record the total for each language and then add them up to get the total number. If none, please enter "0".</p>
Department/Agency (top of the Tool)	Name of the State Department or State Agency that is reporting the language access data in the Language Access Reporting Tool
Division/Office (1)	This category records the Totals for each Division/Office, if applicable, for Categories 2 to 6.
Documents Translated Upon Request	Record the Total Number of Documents that were translated when requested by an LEP person

<p>(5, # of Documents Translated)</p>	<p>by any means, i.e. orally, in writing, etc. Indicate how many documents were translated for each language. <u>Example:</u></p> <p>Documents translated upon request, Total = 10 Number of documents translated upon request by language: Cantonese 2, Hawaiian 1, Marshallese 4, Samoan 1, Vietnamese 2</p> <p>Record the total for each language and add them for the total number. If none, please enter “0”.</p>
<p>Language (1)</p>	<p>This category contains various languages most frequently encountered when LEP customers try to access to state services, programs and activities.</p>
<p>Language Services Expenditures (#) (6)</p>	<p>This category measures how much the Department/Agency spends each quarter on providing various types of language services. Please provide any explanations, if necessary. For example:</p> <p>If a lump sum is reported, please indicate the amount allocated to the current reporting period, and if further explanation is necessary, please attach an explanation to your report.</p> <p>If you are reporting on a lag basis (e.g. you are reporting amounts spent for the previous reporting period because you do not receive your invoices in time to report them for the current reporting tool), then please provide an explanation to that effect.</p>
<p>Oral Language Service (3, Type of Services Provided)</p>	<p>Number of LEP Customers who received oral language services in their language either in person from an interpreter, staff or volunteer at the Department/Agency, or by a telephone interpreter service or any other type of oral language service.</p> <p>Record the total for each language and then add them up to get the total number. If none, please enter “0”.</p>
<p>Oral Language Services (in person) (6, Language Services Expenditures)</p>	<p>Dollar amount spent by the Department/Agency on providing in person oral language services for LEP Customers. For lump sum or lag reporting, see <i>Language Service Expenditures (\$)</i>.</p> <p>Record the total for each language and then add them up to get the total amount. If none, please enter “0”.</p>

<p>Other (3, Type of Services Provided to LEP Customers)</p>	<p>Number of other types of language services provided to LEP Customers, besides oral interpretation or translation (written or sight). Attachment: Please specify the other Type of Service Provided on a separate sheet of paper, and attach it to your report.</p> <p>Record the total for each language and then add them up to get the total number. If none, please enter "0".</p>
<p>Other (4, Type of Oral Language Service Utilized)</p>	<p>Number of times the Department/Agency used someone other than the types already listed to provide oral language services. This includes allowing the use of a family member or friend. Attachment: Please specify the other type of Oral Language Service Utilized on a separate sheet of paper, and attach it to your report.</p> <p><u>Warning:</u> As an initial matter, a Department/Agency should offer interpretation services. A family member or friend should only be allowed to provide language services on a supplemental basis. If a Department/Agency relies solely on the family member or friend for language services, it may risk being liable if the family member or friend, who may be untrained in interpretation, does not interpret accurately, and as a result, the Department/Agency denies benefits or adversely impacts the LEP customer's rights. If the Department/Agency offers an interpreter but the customer prefers to use a family member of friend, then that should be noted in the customer's file. For the latter, you should consider developing a waiver of right to free interpreter services form in various languages for the LEP customer to sign.</p> <p>Record the total for each language and then add them up to get the total number. If none, please enter "0".</p>
<p>Other (6, Language Services Expenditures)</p>	<p>Dollar amount the Department/Agency spends on other languages services, besides oral interpretation or translation (written or sight). For lump sum or lag reporting, see <i>Language Service Expenditures (\$)</i>. Attachment: Please specify the other type of expenditures on a separate sheet of paper, and attach it to your report.</p> <p>Record the total for each language and then add them up to get the total amount. If none, please enter "0".</p>

<p>Period Covered (Quarter/FY) (top of the Tool)</p>	<p>The period covered consists of the quarter and fiscal year. There are four periods in the state's fiscal year. For example:</p> <p>1/2008-09 = First quarter/Fiscal year 2008-09 (covers July, August, September) 2/2008-09 = Second quarter/Fiscal year 2008-09 (covers October, November, December) 3/2008-09 = Third quarter/Fiscal year 2008-09 (covers January, February, March) 4/2008-09 = Fourth quarter/Fiscal year 2008-09 (covers April, May, June)</p> <p>Record the quarter/fiscal year which the reporting tool covers.</p>
<p>Phone No. (top of the Tool)</p>	<p>Provide the telephone number of the Contact Person.</p>
<p>Sight Translation (3, Type of Services Provided)</p>	<p>Number of LEP Customers who received oral interpretation in their language of a written document of the Department/Agency. <i>See</i> DEFINITIONS (on page 1) for definition of <i>Sight Translation</i>.</p> <p>Record the total for each language; then add them for the total number. If none, please enter "0".</p>
<p>Sight Translation Services (6, Language Services Expenditures)</p>	<p>Dollar amount the Department/Agency spent to provide sight translation services for written documents. For lump sum or lag reporting, see <i>Language Service Expenditures</i> (\$).</p> <p>Record the amount for each language and then add them up to get the Total Amount. If none, please enter "0".</p>
<p>Staff Interpreter (4, Type of Oral Language Service Utilized)</p>	<p><i>Staff interpreter</i> is a person who is employed by the State of Hawaii as an Interpreter. <i>See</i> DEFINITIONS (on page 1) for definition of <i>Interpreter</i>.</p> <p>Record the amount for each language and then add them up to get the Total Amount. If none, please enter "0".</p>
<p>Telephone Interpreter (4, Type of Oral Language Service Utilized)</p>	<p>Number of LEP Customers for whom the Department/Agency provided oral language services through a telephone interpreter hired by the Department/Agency. (<i>continued . . .</i>)</p>

	Record the total for each language and then add them up to get the total number. If none, please enter “0”.
Telephone Interpreter Services (6, Language Services Expenditures)	Dollar amount the Department/Agency spent for the reporting period on providing oral language services of an interpreter by telephone through an interpreter that the Department/Agency hired to provide interpretation services. For lump sum or lag reporting, see <i>Language Service Expenditures (\$)</i> . Record the total for each language and then add them up to get the total amount. If none, please enter “0”.
Total (2 nd row)	The Total number for each column of the reporting tool.
Type of Oral Language Service Utilized (#) (4)	This category measures the type of oral language service that is used to provide language services to an LEP customer.
Type of Services Provided to LEP Customers (#) (3)	This category measures the type of language services (oral or written) the Department/Agency provided to LEP Customers during the reporting period.
Vital Documents (5, # of Documents Translated)	Record the total Number of Vital Documents translated during the quarter. “Vital documents” means “printed documents that provide important information necessary to participate in services, programs, and activities”, which includes, but is not limited to, “applications, outreach materials, and written notices of rights, denials, losses, or decreases in benefits or services.” HRS § 371-32. Each agency identifies its own vital documents. Record the total for each language and then add them up to get the total number. If none, please enter “0”.
Volunteer Staff (4, Type of Oral Language Service Utilized)	<i>Volunteer staff</i> is a person who (a) is employed by the State of Hawaii; (b) can communicate fluently in English and in one or more other languages with varying degrees of proficiency; and (c) has volunteered to assist the Department/Agency in language matters. <u>Warning:</u> If Volunteer Staff are used to assist with interpretation, then the Department/Agency

	<p>should provide training for them and test their level of proficiency. Otherwise, the Department/Agency risks being liable if the Volunteer Staff does not interpret accurately, and as a result, the Department/Agency denies benefits or adversely impacts the LEP customer's rights.</p> <p>Record the number of times Volunteer Staff are used for each language and then add the numbers for each language to calculate the Total for Volunteer Staff. If none, please enter "0".</p>
<p>Written Translation (3, Type of Services Provided)</p>	<p>Number of LEP Customers for whom the Department/Agency provided <u>completed</u> written translation, including vital documents previously translated and other documents that the Department/Agency translated upon request of an LEP customer.</p> <p>Record the total for each language and then add them up to get the total number. If none, please enter "0".</p>
<p>Written Translations (6, Language Services Expenditures)</p>	<p>Dollar amount the Department/Agency spent on obtaining written translations of documents. For lump sum or lag reporting, see <i>Language Service Expenditures (\$)</i>.</p> <p>Record the total for each language and then add them up to get the total amount. If none, please enter "0".</p>