

U.S Department of Health and Human Services
Office of the Assistant Secretary for Health
Language Access Plan
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Office of the Assistant Secretary for Health (OASH) Overview

The Office of the Assistant Secretary for Health (OASH) is a Staff Division of the Office of the Secretary in the U.S. Department of Health and Human Services (HHS). The Assistant Secretary for Health (ASH) and the Immediate Office of the Assistant Secretary for Health (OASH-IO) serve in an advisory role to the Secretary on issues of public health and science. The OASH-IO drives the OASH mission to improve the health and well-being of all Americans by leading on policy, practices, and programs through the application of science, innovation, education, and a commitment to social justice and equity.

The OASH-IO provides leadership and coordination across both OASH and the Department as well as provides advice and counsel to the Secretary and Administration on cross-cutting priorities to combat public health issues including and advance health equity: treating Long COVID, protecting and securing access to reproductive health care following the Dobbs decision, promoting healthy eating, nutrition, and physical activity, including advancing the Biden Administration's National Nutrition Action Plan, transforming behavioral health and substance use disorder services; advancing health equity, including for LGBTQI+ individuals; and addressing the health impacts of climate change and environmental hazards .

OASH's policy and legislation unit supports OASH on all policy and intergovernmental matters and is essential to providing leadership with guidance on complex policy areas and timely assessments of emerging needs and requirements to determine programmatic direction.

In support of this mission and with a vision of healthy people, healthy communities, and a healthy nation for all, OASH will focus on the following strategies:

- **Engaging Partners** to foster collaboration and drive progress to advance equity and improve health and well-being by meeting community needs where they are.
- **Centering Communities** or people with lived experiences when developing public health programs, notices of funding opportunities and taking other actions to drive transformation and change to improve public health for all.
- **Addressing Environment, Climate, and Emerging Threats to Human Health** by mobilizing resources to foster resilience to address national priorities impacting health and health equity.
- **Strengthening Public Trust** and building trust in the value of science, medicine, research, data and evidence, federal programs, and health communications to drive policy, fuel innovation, and advance equity in health, safety, and well-being.
- **Advancing Health Equity** by centering equity and sustainability in building OASH's infrastructure, developing policies, administering programs, partnering with stakeholders, and decision-making to achieve optimal health and well-being.

OASH represents a wide, cross-cutting spectrum of public health leadership including:

- Core public health offices – including the Office of the Surgeon General and U.S. Public Health Service (USPHS) Commissioned Corps – and 10 regional health offices around the nation.
- 2 regulatory offices vital to ensuring public trust in research.
- 11 Presidential and Secretarial advisory committees.

Overview - 2024 HHS OASH Language Access Plan

Consistent with its statutory authority¹, the OASH strategic plan, and the HHS Language Access Plan, the HHS Office of the Assistant Secretary for Health (OASH) is committed to supporting meaningful access and building capacity to provide language access through its policies, programs, and practices. Language access services are an important tool in efforts to advance and promote health equity and reduce health disparities.

The overarching goal of the 2024 OASH Language Access Plan (OASH LAP) is to support the directives within the HHS LAP and ensure greater access to the life-saving services that HHS provides for people with Limited English Proficiency (LEP) to promote meaningful access and engagement for all individuals and organizations that OASH funds and interacts with today and in the future. The OASH LAP will guide OASH strategies for staff to advance language access in OASH policies, programs, and operations. The OASH LAP will apply to all OASH employees and programs.

For the purposes of this OASH LAP, language access is inclusive of access for individuals with limited English proficiency (LEP) and/or disabilities, including persons who rely on sign language to communicate, people who are deaf or hard of hearing, blind or low vision, or have speech-related or other disabilities. This LAP will apply to all OASH employees and will align with and support the 2023 HHS Language Access Plan (HHS LAP), the HHS Equity Action Plan, and Executive Orders that support the importance of ensuring language assistance and meaningful access. (See Appendices B & C).

The OASH LAP is aligned with the HHS Office of Minority Health (OMH) LAP. The Office of Minority Health per legal authority through 42 U.S.C. 300u-6 (Section 1707 of the Public Health Service Act, is established in the Office of the Secretary, (and is administratively supported by OASH) for the purpose of improving minority health and the quality of health care minorities receive and eliminating racial and ethnic disparities. The Office of Minority Health works to improve language access across HHS by serving as a key contributor and leader in various HHS efforts to improve communication and language access. High level activities include 1. Participation on the HHS [Language Access Steering Committee](#), which is a Department-wide effort led by the HHS Office for Civil Rights, 2. Through the Language Access Steering Committee implementing the comprehensive language access goals of the 2022 [HHS Equity Action Plan](#), and 3. Assisted with updating the [2013 HHS Language Access Plan](#) (to the 2023 HHS Language Access Plan, www.hhs.gov) to ensure that persons with LEP have meaningful access to HHS-administered programs and activities. In addition, OMH is co-leading three of the department wide Language Access Steering Committee subcommittees focused on oral interpretation, written translations, and accountability.

****The Contact for coordination of the OASH implementation of the plan is Michelle S. Davis, Health Policy Executive and Senior Advisor to the Assistant Secretary for Health.

¹ Authorizing Legislation - PHS Act, Title II, Section 301.

The action steps outlined below will be conducted throughout 2024, with the goal to establish an infrastructure for continued integration of language access within OASH activities. For 2024, OASH aims to focus efforts on seven priority activities for advancing language access, including:

1. OASH IO will appoint a LAP coordinator who will collaborate with all programs and offices (inclusive of headquarters and the 10 regional offices).
2. Each OASH program and office will appoint a POC to serve as a LAP coordinator.
3. The OASH LAP coordinator will convene a LAP council/steering committee consisting of office and program coordinators to provide input for operationalizing the OASH LAP. The OASH LAP Council/Steering Committee will also champion OASH's language access efforts. In consultation with OASH senior leadership, the council/steering committee will oversee the governance of the OASH LAP, including implementation, monitoring, and reporting of the OASH LAP, aligned with the HHS LAP.
4. Initial activities for the OASH LAP council/steering committee will be to address the HHS LAP
 - a. Assess current and previous LAP activities conducted within OASH.
 - b. Assess current LAP policies within OASH.
 - c. Conduct an initial assessment (then annually) of the extent that language assistance or in-language material was requested and/or accessed or otherwise needed by our customers, including beneficiaries and/or other health care and human services partners.
 - d. Develop a budget request to meet anticipated language assistance needs for future years.
5. Continue OASH engagement in HHS language access efforts, including serving on the HHS Language Access Steering Committee.
6. OASH will leverage the Office of Minority Health (OMH) assets for language access.
7. OASH will review and address its current pain points: human and fiscal resources for incorporating LAP into our routine activities.

Elements and Action Steps

Element 1: Assessment and Needs Capacity

OASH will align ongoing assessments of language assistance needs with reporting expectations of the HHS LAP. Development of this LAP serves as the first step in this assessment process. The LAP will be used as a keystone for the development of measures and milestones relevant to each LAP element. Data collected for reporting OASH LAP implementation will be used to improve awareness and implementation of language assistance services for persons with LEP and individuals with disabilities.

The assessment process to be developed may identify and support: 1) communities that interact with OASH programs and OASH resources; 2) non-English languages, including American Sign Language (ASL) or other sign languages, used by the population likely to be accessing or otherwise in need of and eligible for the OASH's services; and 3) barriers to effective oral and written communication.

Methods for identifying needs, gaps, and areas of opportunity may include but are not limited to listening sessions, program data reviews, environmental scans, and policy reviews. These methods may engage grant awardees, contractors, and partners as appropriate.

Assessment results will also be used to inform budget requests for anticipated language assistance needs for upcoming years.

Action Steps: OASH

- a. OASH will initiate an assessment process based on available resources and as appropriate to inform policies and practices that ensure OASH's language assistance services support customer needs, in alignment with the actions outlined in Element 8, and will utilize this information for updating the OASH LAP as needed. We will also determine whether the agency's current language access program is effective and complies with Section 1557.
- b. Each year, OASH will host or participate in at least one listening session hosted by another agency to learn about challenges and opportunities for improvement in the agency's language access efforts.
- c. OASH will take specific steps to develop or amend policies or practices that ensure the agency's language assistance services are adequate to meet customer needs and advise agency officials on updating the agency language access plan as needed. Agency Language Access Plans should be tailored in a way that makes sense to the agency and the communities they serve.

Element 2: Interpretation Language Assistance Services

Interpretation language assistance services are essential to ensure meaningful access to and an equal opportunity to participate fully in the services, activities, programs, or other benefits administered or funded by OASH. These services will include options for people with disabilities who are entitled to appropriate **auxiliary aids and services** where necessary to afford them an equal opportunity to benefit from HHS's programs and activities. Auxiliary aids and services include, but are not limited to, qualified sign language interpreters on-site or through video remote interpreting services.

For OASH-hosted convenings, OASH will aim to make sure participants are aware that OASH will provide them with interpretation services at no cost and provide information on how to obtain interpreting services.

Action Steps:

- a. Within 180 days of issuance of this Language Access Plan, OASH will designate an office or official responsible for establishing agency-wide policies and procedures for providing interpreting services in a manner that ensures timely communication between persons with LEP and HHS divisions for people with disabilities and OASH offices and programs. Procedures will address the various methods for providing interpreter services, including procedures that ensure provision of effective remote voice and video interpreter services. The standard operating procedures will also include information on how OASH staff should respond to language assistance services requests.
- b. OASH will identify agency points of contact (POC) who are responsible for:
 1. Developing and administering a remote voice and video interpreting program for each public-facing division that ensures individuals with LEP are aware that HHS will provide interpreter services at no cost and provide guidance on how to obtain the agency's interpreter services, whenever available
 2. Assessing their agency's remote voice and video interpreting program, consulting with subject matter experts, making recommendations for improving the effectiveness of the program, and providing a budget justification for actions that improve the program.
 3. Developing methods and mechanisms for ensuring LEP communities are aware that HHS will provide them with interpretation services at no cost and provide information on how to obtain interpreting services
 4. Developing 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.
 5. Each fiscal year, submit a budget justification for message dissemination to raise awareness of available interpretation services.
 6. Devise criteria for the assessing of bilingual staff or sign language interpreting staff for their ability to provide interpretation services and ensure such employees are compensated appropriately if they are called to provide interpretation services.
 7. Consider maintaining a list of qualified bilingual and multilingual staff capable of providing competent interpretation services that identifies contact information for the employee and the language(s) in which they are competent to interpret.
 8. Devise a plan for how staff will be trained to respond to language assistance services and requests and who may call upon staff to perform language access services language assistance services.
 9. Establish a list of all contacts and other resources available to the agency and qualified in providing on-site interpreting (OSI), over-the-phone interpreting

- (OPI), and video remote interpreting (VRI) to LEP individuals and people with disabilities who require sign language interpretation seeking information on or access to agency programs and activities.
10. Develop a mechanism for monitoring and evaluating interpretation services.
 11. Offices that directly serve the public or fund programs and activities that serve the public will establish help lines that are supported by OPI and VRI. At minimum, the help lines will quickly connect callers who speak the 15 most commonly spoken languages in the relevant state(s), Territories and Tribal communities (according to the most recent relevant data from the U.S. Census Bureau) to telephonic or video interpreters. Based on community and individual needs, more languages may be necessary and should also be included.
 12. OASH POCs will serve on at least one intra-agency working group to learn and share effective practices for enhancing interpretation language assistance and make recommendations to their respective agency head for improving their interpretation language assistance program.
 13. OASH will consider including provisions for ensuring that interpretation services are accessible to individuals with disabilities, including those who are deaf or hard of hearing or who have other communication-related disabilities.

Element 3: Written Translations

OASH 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 our programs.

OASH will identify, translate, and make accessible in various formats, including print, online, and electronic media, **vital documents**, including important consumer/patient information, in an accessible format, in languages other than English in accordance with assessments of needs and capacity conducted under Element 1. For purposes of this Language Access Plan, OASH will utilize the HHS LAP Appendix B to assist with determining vital documents,

Regarding matters of **plain language**, cultural communication, and health literacy should be considered for all documents, including when originally composing in English. Materials that are translated, should be easily accessible on the agency's website.

OASH intends to comply with the 2023 HHS LAP that states, notices of nondiscrimination may potentially be required to be translated in the top 15 languages spoken by persons with LEP.

Action Steps:

- a. OASH will establish standard operating procedures for providing translation services in a manner that ensures timely communication between persons with LEP and/or people with

disabilities and OASH. The standard operating procedures will also include information on how OASH staff should respond to language assistance services requests.

- b. OASH will continue to monitor and evaluate translation, including the number of requests for translation services, the type of translation requested, and the languages requested.
- c. OASH will develop and regularly update a list of OASH resources already available in non-English languages, including American Sign Language, and post the index to an internal website available to OASH staff.
- d. OASH will take reasonable steps for ensuring the availability of vital documents in the preferred languages for LEP communities reached through OASH programs and activities. OASH will also provide alternative methods for providing meaningful language access to vital documents, whenever possible.
- e. OASH, where possible, will provide translated written materials in other formats such as audio, video with closed captions, video with sign language, infographics, etc., for persons with limited literacy and/or disabilities, and for those whose language does not have a written form.
- f. OASH will ensure that all online translated content shall comply with Section 508 of the Rehabilitation Act.

Element 4: Policies Procedures, Practices

OASH will establish and maintain an infrastructure designed to implement and improve language assistance services within the office. OASH aims to enhance its ability to assess policies, programs, and practices, including through improved data collection and utilization, to help inform OASH's activities to advance language access. The results of the assessment from Element 1 will be used to inform the development of policies, procedures, and practices appropriate for OASH to promote accessibility for individuals with LEP. OASH will ensure policies, procedures, and all language assistance activities are developed and implemented in alignment with the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care.

Action Steps:

- a. OASH will develop standard operating procedures outlining policies and procedures for language assistance services, including how staff can request written translations of OASH resources, how staff can request oral interpretation services for OASH

convenings, and how to address feedback received from partnering entities regarding language assistance services and products.

- b. OASH will regularly collect metrics to monitor implementation and efficacy of the LAP. OASH will report these metrics to the Language Access Steering Committee (LASC) annually and will share insight on best practices and lessons learned with the LASC and its subcommittees when relevant.
- c. OASH will routinely review federal policy related to language access to ensure OASH remains aligned with current standards, regulations, and law, and, as appropriate, provide input/recommendations to improve the policies or their implementation.
- d. OASH will share with the Language Access Steering Committee policies and procedures, highlighting those that might be more effective or efficient if adopted on a department- or governmentwide basis so the Language Access Steering Committee can include the information in the annual progress report.

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

HHS agencies must take reasonable steps to ensure meaningful access to their programs and activities by persons with LEP, including notifying persons with LEP who are current or potential customers about the availability of language assistance at no cost. Notification methods should include multilingual posters, signs, and brochures, as well as statements or **taglines** on English written application forms and other informational material distributed to the public, including electronic forms such as agency websites.

The results from the Element 1 assessment will be used to inform OASH on the languages in which the notifications should be translated. At minimum, OASH will provide information about rights to nondiscrimination and the availability of language assistance and auxiliary aids in the 15 most commonly spoken languages according to the most recent relevant data from the U.S. Census Bureau. OASH will also notify people with disabilities that they are entitled to communication with the agency that is as effective as communication with others, including through the free and timely provision of vital information through appropriate auxiliary aids and services.

Action Steps:

- a. OASH will designate an office or official 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.
- b. OASH will distribute and make available resources, such as HHS'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 to all current recipients, contractors, and vendors.

- c. OASH will promote HHS efforts and resources to ensure entities funded by OASH are 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.
- d. Each fiscal year, OASH will submit a budget justification for message development and dissemination to raise awareness of available language assistance services
- e. OASH will utilize various methods and networks, including public service announcements, non-English media, and community-and faith-based resources to ensure that LEP communities served by the agency are aware that language assistance services are provided at no cost to them. In addition, find opportunities to inform health care and human services partners and individuals with LEP that the HHS LEP Guidance is also available in languages other than English.
- f. OASH will develop and prominently display appropriate language taglines on vital documents, web pages currently available in English only, or only available in a limited number of non-English languages, technical assistance, and outreach materials, as well as other documents notifying intended audiences that language assistance is available at no cost and how it can be obtained.
- g. OASH will highlight the availability of consumer-oriented materials in plain language and languages other than English on Department websites and ensure such materials inform individuals with LEP about available language assistance services.

Element 6: Staff Training

OASH will provide training and resources to ensure staff understand and can implement the policies and procedures of this plan and the HHS LAP. OASH will promote learning and technical assistance opportunities to support quality language assistance services and encourage accountability across OASH and employ best/promising practices in communication and language assistance.

Action Steps:

- a. OASH will provide and monitor training and resources as necessary to inform designated staff to implement elements of this plan.
- b. Upon completion of this plan, OASH will collaborate on the development of training available to all OASH staff to inform them about the HHS LAP, the OASH LAP, OASH language access priorities, and any other information deemed relevant to carrying out OASH language access efforts. The training(s) may 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
 - Accessing and providing language assistance services through contracted or other personnel
 - 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
- c. OASH will collect and assess feedback from the training to establish a quality improvement loop and help determine future training and resources needs.
 - d. OASH will designate its communications offices to notify employees that OASH provides language assistance and will inform employees on how to help with language assistance services.
 - e. OASH will disseminate training materials, whether newly developed or pre-existing, that assist management and staff in procuring and providing meaningful communication for individuals with LEP. The federal learning management system (LMS) could be a useful resource to consult for training materials regarding, for example, Section 508 and CLAS standards.
 - f. OASH will develop a dedicated resource webpage on OASH's intranet site that can serve as a repository of Standard Operating Procedures, guidance documents, materials, training opportunities, etc.

Element 7: Assessment and Accountability: Access, Quality, Resources, Reporting

To increase availability and quality of language assistance services, agencies must designate an office or official to establish an infrastructure to annually assess their agency's language assistance program and make recommendations for improvements. Specifically, the designated office or official will assess the efficacy and availability of services provided to individuals with LEP and people with disabilities, including customer waiting time; quality of written translations and interpretation utilization of appropriate communication channels; barriers to providing services and overall customer satisfaction with the language assistance services provided.

Action Steps:

- a. OASH will regularly assess the accessibility and quality of language assistance activities available to individuals with LEP and individuals with disabilities. The assessment may include metrics outlined in Element 4 as well as feedback received from grant awardees, contractors, and regional offices regarding the quality of written translations; interpretation and translation utilization; and identified or potential barriers to providing services. Information collected may include:

1. Performance measures for OASH programs, including disaggregated demographics categories and language metrics.
 2. Methods employed to promote and implement the National CLAS Standards.
- b. OASH will develop and implement a process to annually report to the HHS Language Access Steering Committee on progress implementing each element of this plan, effective practices, and barriers to improving language access, in accordance with the Language Access Steering Committee reporting timelines.
 - c. OASH will address, in accordance with policies and procedures developed under Element 4, feedback received from grant awardees, contractors, and other partnering entities regarding language assistance services and products, or other services provided, in a timely manner.
 - d. OASH will implement methods for measuring improvements in language access in individual programs and activities and take steps to ensure that such information is collected and reported to the Language Access Steering Committee.

Element 8: Consultation with Partners

OASH aims to increase consultation and collaboration with partners (e. g. health and human services partners) to inform and improve language access efforts, better highlight research and innovation, and make resources more readily available. OASH will regularly engage with partners, in accordance with the HHS LAP and other federal policies, to identify language assistance needs of individuals with LEP, implement appropriate language access strategies to ensure individuals with LEP have meaningful access in accordance with assessments of customer need and agency capacity, and evaluate progress on an ongoing basis.

Action Steps:

- a. OASH will be responsible for identifying and developing opportunities to include partners in the development of policies and practices that enhance access to programs and activities for persons with LEP and people with disabilities.
- b. OASH will plan and coordinate conversations with partners to assess the accessibility, accuracy, cultural appropriateness, and overall quality of language access efforts. These engagements may be conducted through formal listening sessions, requests for information, and/or informal dialogue.
- c. OASH will continue to promote the HHS LAP and resources with partners in an accessible manner.
- d. OASH will share HHS and agency Language Access Plans and resources with health care and human services partners in an accessible manner and solicit their feedback. Incorporate health care stakeholder input in HHS and agency Language Access Plans, as

appropriate and consistent with this plan.

- e. OASH will regularly participate in at least one listening session, whether hosted by OASH, HHS agencies, or another federal agency, to learn about challenges and opportunities for improvement in language access activities.
- f. OASH will publish this LAP and other relevant resources on its's website in accessible formats, as well as contact information to receive questions and comments.
- g. OASH will continue to seek opportunities for collaboration and coordination with partners focused on advancing language access services through Department-level workgroups and strategic internal and external engagements.

Element 9: Digital Information

OASH will develop and implement specific written policies and strategic procedures to ensure that, in accordance with assessments of LEP needs, the needs of people with disabilities, and agency capacity, **digital information** is appropriate, available and accessible to people with LEP in need of language assistance services in languages other than English. OASH will comply with Section 508 of the Rehabilitation Act of 1973, which requires federal agencies to ensure that their information and communication technology, including websites, electronic documents, and software applications, are accessible to individuals with disabilities. OASH will also aim to ensure that translated digital content meets Section 508 requirements to improve access for people with disabilities. In addition to the requirements of Section 508, OASH will take reasonable steps to comply with Section 504 of the Rehabilitation Act of 1973 to ensure effective communication with people with disabilities. OASH will also work with their internal web content staff and the Office of the Chief Information Officer (OCIO) to periodically assess and monitor translated digital content to improve meaningful access for persons with LEP.

OASH will review and consider: the 21st Century Integrated Digital Experience Act (IDEA) which requires any public federal agency website created after December 2018 to follow the U.S. Web Design System (USWDS). The current USWDS includes the language components linked below:

- Language Selector Component- Allow users to select their preferred language when visiting a website.
- Select between two languages
- Select from three or more languages
- Find selected content in other languages
- Preferred Language Component - Help a user to choose the languages they prefer for communication

Action Steps:

- a. OASH will designate an office or official 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, and regularly monitor efficacy, quality, readability, and accessibility of translated materials
- b. OASH will share resources via digital channels to increase awareness and utilization of products available in non-English languages. This may also include promoting the resources on www.lep.gov by providing links to the www.lep.gov website on the OASH website.
- c. OASH will prominently display links and/or symbols at the top-right corner of the agency's English language website, to pages and documents that are also available for viewing or downloading in languages other than English including sign language.
- d. OASH will prominently display links on the agency's English language homepage that effectively steers visitors to telephonic interpreter services in the visitor's language.
- e. OASH will notify and direct 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.
- f. OASH will serve on the HHS LASC subcommittees, and/or other inter- and/or intra-agency working groups as applicable, that focus in part on making government websites more accessible to persons with LEP in multiple languages and people with disabilities through various multimedia formats.
- g. OASH will conduct a usability test with visitors with LEP every two (2) years to collect data (including intersectional and disaggregated demographic data), identify features, and components that might need to be addressed to improve access and navigation of webpages, products, or services online.
- h. OASH will regularly monitor the efficacy, quality, readability, and accessibility of translated materials provided online to promote ease of use and access. Regularly consider and evaluate advancements in technology such as artificial intelligence, including machine learning, to expedite translation while committing qualified human translators and editors for review.
- i. For virtual meetings, OASH will ensure that the platform being used provides for closed captioning and that the captioning function is enabled by the host. As a best practice, consider using real time translation services such as Communication Access Realtime Translation (CART) to ensure better accuracy of captions
- j. As a best practice for virtual meetings, provide attendees the option to request auxiliary aids and services or reasonable modifications in the meeting invitation so that individuals with disabilities may take part in the meeting. In practice, this will generally amount to

requests for captioning and/or sign language interpreters so that attendees with disabilities may participate. The invitation may require that any requests for auxiliary aids and services or reasonable modifications be made by a certain date prior to the meeting to allow the meeting organizer sufficient time.

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

OASH will ensure that award recipients understand and comply with their obligations under civil rights statutes and regulations enforced by HHS that require them to provide language assistance services. Further, each such agency shall strive to provide direct funding specifically for language access, to increase the resources needed to reach the goals and benchmarks herein

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. OASH is committed to a process of ongoing program reviews 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 are included in grant announcements, requirements, and policies. For example, Notices of Funding Opportunity (NOFOs) issued by OASH programs must include Non-Discrimination Requirements and reference guidance from the HHS Office for Civil Rights. NOFOs must also specify that recipients of federal financial assistance must ensure that their programs are accessible to persons with LEP. NOFOs should also provide guidance relevant to the application of the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care.

OASH will ensure that language access services established through NOFOs, contracts, and awards reflect language access needs by identifying opportunities to develop and collect standardized language access measures across OASH initiatives and consistent with Element 1. OASH will take the following steps to improve procedures and policies to advance language access in funding mechanisms, in line with the National CLAS Standards.

Action Steps:

- a. The Office of the Assistant Secretary for Health (OASH) Grants and Acquisitions Management Division will work with Assistant Secretary for Financial Resources (or the relevant budget office) to establish 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.
- b. The OASH Grants and Acquisitions Management Division, will ensure recipients:
 - are aware of their language access obligations under Title VI and Section 1557.

- have plans for serving persons with LEP and persons with disabilities that ensure their programs and activities can comply with the assurances they give in exchange for HHS funds.
 - understand the process for including budget lines in their proposals for providing language assistance services.
 - annually report the amount and type of language assistance services provided to their customers and the languages in which the services were provided.
 - receive, resolve, and document feedback, including complaints, in a timely manner; and
 - follow guidance and technical assistance provided by the agency.
- c. In consultation with the grants office, OASH programs will identify opportunities and, as appropriate, 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.
- d. OASH will 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.
- e. OASH will incorporate questions about language accessibility and meaningful communication in the agency's onsite program reviews, questionnaires, or surveys designed to determine compliance with grant obligations.
- f. OASH will include civil rights compliance language and guidance in program outreach materials when appropriate, and, to the extent feasible, ensure its accessibility for people with LEP and/or disabilities.
- g. OASH Grants and Acquisitions Management Division will consult with the HHS Office of Acquisitions Management Services, as appropriate, on the development and execution of contracts supporting language assistance services.
- h. OASH will promote efforts and resources to funded entities as specified in Element 5, to ensure they are aware that language assistance services must be provided at no cost to those in need of language assistance services.

Appendices

- A. Definitions
- B. Guiding Legal Authorities
- C. Language Access Related Resources
- D. OASH 2024 Organizational Chart

Appendix A: Definitions

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

Agency	Agency refers to HHS Operating Divisions (such as the Centers for Disease Control and Prevention, Food and Drug Administration, or the National Institutes of Health) 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.
Applicant	Any person who inquires about or applies for public assistance benefits under any program or service.
Certificate	An academic recognition demonstrating the successful completion of a program of study, usually based on amount of instructional time and a minimum grade.
Certification	Institutional recognition demonstrating successful passing of an examination that tests knowledge, skills, and abilities related to an occupation.
Contractor	Any entity that performs work or provides services on behalf of an agency or division under a contractual agreement with reimbursement.
Customer	Individuals, businesses, and organizations that interact with an HHS agency or program. The term customer is inclusive of beneficiaries and interested parties.
Digital Information	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.
Direct “in-language” communication	Monolingual communication in a language other than English between a multilingual staff and a person with LEP (e.g., Korean to Korean).
Disaggregated Data	Data that separates out subgroups to provide the most descriptive and detailed information possible; for example, rather than using data about “Asian languages” or “Native American languages,” disaggregated data would indicate which specific languages are spoken by an individual or at the community level. Disaggregated

	data may also include information about varied dialects, as well as more specific national origin information.
Effective Communication	For communication disabilities, it refers to aids and services to ensure that communication with people with disabilities, such as people who are deaf or hard of hearing, is as effective as communication for people without disabilities.
Interpretation	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.
Language Access	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.
Language Assistance	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.
Limited English Proficiency (LEP)	An individual who does not speak English as their preferred language and who has a limited ability to read, write, speak, or understand English in a manner that permits them 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 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 deaf or hard of hearing may also have limited proficiency in spoken or written English and may not be proficient in American Sign Language (ASL) or any other recognized sign language.
Meaningful Access	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.
Participant	Any person who has applied for and is receiving public assistance benefits or services under any HHS program or service.
Plain Language	Plain language as defined in the Plain Writing Act of 2010 is writing that is “clear, concise and well organized.”
Preferred/Primary Language	The language that LEP individuals identify as the preferred language that they use to communicate effectively. The language

	that LEP individuals identify as the preferred language that they use to communicate effectively.
Qualified Interpreter or Translator	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.
Sight Translation	The oral or signed rendering of written text into spoken or signed language by an interpreter without change in meaning based on a visual review of the original text or document.
Sign Language	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.
Taglines	Brief messages that may be included in or attached to a document. Taglines in languages other than English are used on documents (including websites) written in English that describe how individuals with LEP can obtain translation of the document or an interpreter to read or explain the document. Section 1557 and Title VI will prescribe the languages that must be included in such tagline notices but covered entities may also add more languages.
Translation	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 and considering differences of culture and dialect.
Vital Document	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.

Appendix B; Guiding Executive Orders and Legal Authorities

The OASH LAP directly aligns with and supports the 2023 HHS LAP, the HHS Equity Action Plan, and Executive Orders that support the importance of ensuring language assistance and meaningful access: EO 13116, Improving Access to Services for Persons with Limited English Proficiency; EO 13985, Advancing Racial Equity and Support for Underserved Communities Through the Federal Government; EO 13995, Ensuring an Equitable Pandemic Response and Recovery; EO 14031, Advancing Equity, Justice, and Opportunity for Asian Americans, Native Hawaiians, and Pacific Islanders; and EO 14091, Further Advancing Racial Equity and Support for Underserved Communities Through the Federal Government.

The OASH LAP is aligned with the following legal authorities: Section 1557 of the Affordable Care Act, Title VI of the Civil Rights Act of 1964, The Plain Writing Act of 2010, the Americans with Disabilities Act, and the Rehabilitation Act of 1973, § 504 and 508.

Appendix C: Language Access Related Resources

- **Agency for Healthcare Research and Quality:**

<https://www.ahrq.gov/teamstepps-program/resources/additional/check-back.html>

<https://www.ahrq.gov/teamstepps-program/resources/additional/cus-words.html>

- **American Translators Association**

<https://www.atanet.org/>

- **Certification Commission for Healthcare Interpreters**

<https://cchicertification.org/>

- **Department of State Office of Language Services: Frequently Asked Questions - United States Department of State**

<https://www.state.gov/frequently-asked-questions-office-of-language-services/>

- **Federal Interagency Working Group on Limited English Proficiency (LEP)**

www.lep.gov

- **Federal Plain Language Guidelines**

www.plainlanguage.gov/howto/guidelines/FederalPLGuidelines/TOC.cfm

- **Health Literacy Online: A Guide to Writing and Designing Easy-to-Use Health Web Sites**

https://health.gov/healthliteracyonline/2010/Web_Guide_Health_Lit_Online.pdf

- **Interagency Language Roundtable**

www.govtilr.org/

- **International Organization for Standardization: Standards for Translation, interpreting and related technology (ASTM F43, ISO/TC 37/SC 5)**

<https://www.iso.org/committee/654486.html>

- **National Action Plan to Improve Health Literacy**

www.health.gov/communication/HLActionPlan/

- **National Board of Certification for Medical Interpreters**

<https://www.certifiedmedicalinterpreters.org/>

- **National Council on Interpreting in Healthcare**

<https://ncihc.memberclicks.net/>

- **Office for Civil Rights: Language Access Resources**

www.hhs.gov/lep

- **Office of Minority Health: National CLAS Standards**

<https://thinkculturalhealth.hhs.gov/clas>

- **The Public Health Communicators Guide to Creating Accessible Social Media Communications Tool: Accessible Social Media for Public Health - Public Health Communications Collaborative (PHCC) (publichealthcollaborative.org)**

Appendix D: OASH 2024 Organizational Chart

