

INTRODUCING THE “I SPEAK” CARD!

- Who needs it?** Your clients/patients with limited English proficiency
- When do they need it?** It’s designed to be used when they are going for medical care without an interpreter, but it could be helpful whenever people need to let others know they don’t speak English and to identify the language they do speak.
- Who fills it out?** You can, as you get intake information from your client.
- Why is there a space for my name?** Outreach workers have told us they wished providers would call them when their clients appeared for care so they could troubleshoot coverage issues and make referrals for a whole range of needs.
- Where do we get more?** Take a handful now. Make double-sided copies on cardstock. If you need a few more originals, call Community Partners at 413-253-4283. If you want a large quantity, call and we’ll arrange something.

What’s required by law?

Federal Law: (information from Office of Civil Rights, US Department of Health and Human Services)
<http://www.hhs.gov/ocr/lep/fact.html>

Language assistance to persons with limited English proficiency is covered under Title VI of the Civil Rights Act of 1964. Title VI covers any organization or individual that receives Federal financial assistance, either directly or indirectly, through a grant, contract or subcontract. Examples include hospitals, nursing homes, home health agencies, HMOs, health service providers, and human services organizations. All have an obligation to ensure that persons with limited English proficiency can meaningfully access health and social services. A program of language assistance should provide for effective communication between the service provider and the person of limited English proficiency so as to facilitate participation in, and meaningful access to, services.

Massachusetts Law: (information from Health Care For All)

- All hospital emergency rooms and acute psychiatric services must use competent interpreter services when treating non-English speakers.
- A competent interpreter must be trained and proficient in interpreting, and must be knowledgeable about the specialized terms and concepts to be interpreted.
- The DMA and DPH must reimburse hospitals for their reasonable costs.
- Any person deprived of appropriate health care because of a hospital’s inadequate interpreter system has a right to sue for damages.