Maine Center for Disease Control and Prevention  
WIC Nutrition Program

Effective: October 1, 2012  
Revised: August 1, 2016

Policy No. CR-6

Language Access

Authority

7 CFR §246.8(a) and (c)  
34B MRSA §1218 Maine statutes regarding services to persons who are deaf or hard of hearing  
32 MRSA §1521(5) ASL interpretation  
32 MRSA §1525-A(2)  
22 MRSA §255 and §1951  
10-144 CMR Chapter 286, §II.P.3  
Civil Rights Act of 196442 USC §§2000a et seq.  
Americans with Disabilities Act of 1990 (42 USC §§12101 et seq.)  
Rehabilitation Act of 1973 (42 USC §§701 et seq.)  
28 CFR Parts 35 and 42  
FNS Instruction 113-1  
Policy #DHHS-01-03

Policy

1. All programs, benefits or services provided by Maine CDC WIC agencies shall be made available to all eligible persons regardless of their ability to speak, write and/or understand English.

2. The State Agency shall provide Local Agency staff with interpreter resources for providing access to programs and services to persons with limited English proficiency and to persons who are deaf or hard of hearing. These shall include in-person and telephone interpreter services, as well as translated material.

3. Local Agencies shall provide interpreter services at no cost to individuals applying for or participating in the Maine CDC WIC Nutrition Program.

4. The State Agency shall be responsible for costs associated with provision of interpreter services.

5. State and Local Agencies shall mitigate any delay in service delivery due to the need for interpreting services.

6. The State Agency shall regularly evaluate available interpreting services and research methods of improvement. Staff shall be informed of new resources and procedures.
7. When possible, the State and Local Agencies shall employ bilingual/multilingual staff members who are able to communicate directly in languages used in their catchment areas.

8. Local Agencies shall develop and maintain procedures for how staff shall provide interpretive services to applicants/participants.

9. When appropriate, program information is provided in languages other than English (for any non-English speaking population which exceeds 5% of the overall area population according to census data).

**Procedures**

1. In the event that no written translation of a document is available, the Maine CDC WIC State Agency shall ensure that in-person translation or translation by telephone is provided in a timely manner.

2. In the reception areas of all State and Local Agency buildings, WIC shall post and maintain signs in various languages, informing the public that interpreter services are available at no charge to them. A customizable sign is available in Appendix CR-6-A.

3. TTY (telephones for the deaf) numbers shall be included in any listing of Agency telephone numbers. TTY numbers shall be listed and clearly identified on all letterhead, business cards, brochures or fliers, facsimile cover pages, posters, web sites, or similar documents or communication tools.

4. Local agencies shall utilize the Maine Telecommunication Relay Service for deaf/hard of hearing applicants/participants. The voice call number is Maine Relay 711.

5. If, at initial contact, applicants/participants are non-communicative or exhibit limited English skills, the staff member shall consider whether this person may have limited English proficiency or may be deaf or hard of hearing. When in doubt, staff shall offer appropriate interpreter services to ensure equal access.

6. If an applicant/participant is determined to be limited English proficient (LEP), or deaf/hard of hearing, staff shall inform him/her of his/her right to have language interpreter service at no cost, document that the individual is LEP or deaf/hard of hearing in the applicant/participant record, and indicate his/her primary language.

7. Arrangements for an interpreter or translator shall be made using the language bank or interpreter services provided and approved by the State Agency. See Appendix CR-A3 for available options and guidelines. Local agency staff shall use the following guidelines for choosing in-person interpreter versus phone interpreter services for limited English proficient (LEP) applicants/participants:

   7.1 In-person interpreters are preferred for the following appointment situations:

   7.1.1 Initial enrollment appointments (individuals/families who have not previously received WIC services)
7.1.2 Follow-up counseling appointments during the first 6-12 months of program enrollment

7.1.2.1 Assessment for understanding of program rules shall be done at each appointment, including benefit redemption.

7.1.2.2 Participants who are assessed to have misunderstandings regarding details of program participation may continue to have in-person interpreter services arranged until the misunderstandings are clearly communicated and assessed to be understood.

7.1.3 High-risk appointments

7.1.3.1 Medical high risk

7.1.3.2 High risk breastfeeding dyads

7.1.4 Loaner breast pump issuance appointments

7.1.5 Formula change appointments

7.1.6 Justification for in-person interpreter services shall be documented in the participant record.

7.2 Phone interpreter services shall be utilized for the following appointment situations:

7.2.1 Reapply appointments for families known to have participated in the WIC Program in Maine within the past two (2) years

7.2.2 Walk-in appointments or appointments scheduled on same day

7.2.3 Participants assessed to clearly understand details of program requirements, including benefit redemption procedures

8. Staff members who are proficient in languages other than English are encouraged to communicate directly and provide services to applicants/participants in their preferred language, if it is the applicant/participant’s choice.

8.1 It is prohibited for Local Agency staff to act as an interpreter for another counselor.

9. Emergencies, during which life, health or safety of participants or others may be in immediate jeopardy, are sufficient reason for WIC employees to use their best judgment and efforts to facilitate communication until such time as qualified interpreters become available.

10. When an individual who is LEP or deaf/hard of hearing declines in-person or telephone interpreter service, a person of the participant/applicant’s election may be used as an interpreter if the State or Local Agency deems the use of such a person appropriate.
10.1 The use of such persons is appropriate only when the WIC staff member ascertains that the proposed interpreter is willing and able to provide effective communication between the parties.

10.2 Local Agency staff shall document the name of the person serving as an interpreter.

10.3 A family member or friend shall be utilized as an interpreter only when other interpreter services have been offered and refused and both parties have agreed to use the family member or friend.

10.4 The Maine CDC WIC Nutrition Program is not responsible for costs incurred when a non-qualified interpreter is selected, or when interpreters have not been scheduled in advance by WIC Program staff.

10.5 WIC staff shall inform an LEP applicant/participant who has declined a WIC-provided interpreter that s/he has the right to request a WIC-provided interpreter at any subsequent time.

10.6 Should Local Agency staff have reason to believe that an elected interpreter is hampering effective communication between Local Agency staff and the LEP/deaf or hard of hearing individual, Local Agency staff shall obtain and provide another interpreter.

10.7 Minors shall not be used as interpreters under any circumstance.

11. All participant records shall document the source of the interpreter used for each appointment or communication with participant.

11.1 If no interpreter was utilized, the applicant’s/participant’s record shall show the reason for this decision and document any attempts made to obtain an interpreter.

12. Local Agencies shall maintain an interpreter log (Appendix CR-6-B) and send to the State Agency monthly.

13. All Local Agency staff members who may be called upon to utilize interpreter services shall be trained in New Employee Orientation as well as periodically as training needs are identified on the following:

13.1 The impact of ethnic and cultural differences and effective communication

13.2 The crucial need for sensitivity and understanding of ethnic and cultural differences

13.3 How to use interpreter services effectively