CHS Oregon Department of Human Services

Seniors and People with Disabilities

James Toews, Assistant Director Authorized Signature

Number: SPD-AR-04-013 Issue Date: 03/16/2004

Topic:	Forms

Due Date:

Subject: New Procedure for Requesting Written Translation of Client Notices

Applies to (check all that apply):

- All DHS employees
- X Area Agencies on Aging
- Children, Adults and Families
- X County DD Program Managers
- X County Mental Health Directors
- Health Services
- X Seniors and People with Disabilities
- X Other (please specify): Community Human Services

Action Required:

Start using a new procedure for requesting written translations of client notices. This new procedure does <u>not</u> change:

- The way local offices request oral interpreter services,
- The process for getting large print notices from the mainframe (in English or Spanish) through use of the Braille Plus contractor,
- Other mainframe notices that the system translates based on a language code, and
- The expectation that any form that is available in a translated version on the DHS

Forms server (http://www.dhs.state.or.us/admin/forms/index.html) will be used.

This procedure <u>does</u> affect the following:

♦ Mainframe notices that are printed in English and need to be translated into Cambodian, Laotian, Romanian, Russian, Vietnamese or Bosnian, and

 Client notices that need written translation into a language other than English in all other situations, such as letters written on branch letterhead or notices produced from the Oregon ACCESS system.

Under the previous procedure, the local office requested these written translations directly from the vendor, and then faxed a half-sheet to SPD in central office to confirm the request, so that central office would pay the invoice for the service when received.

Action Request Transmittal

This new procedure replaces that process.

Under the new procedure, local offices can no longer send translation requests directly to the vendor. All requests for translation of client notices must be sent to the DHS Office of Forms and Document Management (OFDM), who will forward translation requests to the vendor that will complete the work. Use the Project Request (DHS 1001, attached) to request the translation. Access this form through the internet at http://www.dhs.state.or.us/admin/forms/index.html and fill it out. Unfortunately, the completed form cannot be saved and attached to an email, so print it and fax it to OFDM. Each request must be authorized by a local manager or designee who has the authority to spend agency funds. The manager or designee can accomplish this by sending an email along with the completed form or by signing the DHS 1001. If the request is authorized by email, the document name and or DHS form number must be included. In addition, send an electronic version of the form or notice whenever possible. For example, if it is a letter, the document can be sent electronically attached to an email. However, if it is a completed notice or form from Oregon ACCESS, it is not available electronically and must be sent by fax. For each request for translation, send the DHS 1001, the authorization (if separate), and the notice by email and/or fax to Donna Zeit or Maria Scott, whose contact information is listed at the bottom of this transmittal.

Instructions for completing the DHS 1001 are as follows:

- ◆ <u>Section 1</u>: Fill in Date, Your name, Phone #, Agency # (cost code).
- <u>Section 2</u>: Fill in Document name and/or number, check "yes" that it is for client use, quantity needed, date needed.
- <u>Section 3</u>: Check "translation."

• <u>Section 4</u>: Fill in the client's address or your address where the form or notice is to be mailed.

• <u>Section 5</u>: Specify the language.

Do not complete page 2 of the form.

After the translation has been provided, the process for the vendor has not changed. The vendor will still send the invoice to Joanne Schiedler, who will authorize payment under central office PCA and Index numbers.

Reason for Action:

Due to the DHS reorganization, there is a new procedure for requesting translation of client notices. The new procedure is necessary to prevent duplicate translations of the same material in different local office areas.

Field/Stakeholder review: X Yes No

If yes, reviewed by: Operations Committee

If you have any questions about this action request, contact:

Contact(s):	Joanne Schiedler				
Phone:	(503) 947-5201	Fax:	(503) 373-7902		
E-mail:	Joanne.r.schiedler@state.or.us				
Contact(s):	Donna Zeit				
Phone:	(503) 945-7021	Fax:	(503) 373-7690		
E-mail:	Donna.I.zeit@state.or.us				
Contact(s):	Maria Scott				
Phone:	(503) 945-6118	Fax:	(503) 373-7690		
E-mail:	Maria.e.scott@state.or.us				

DHS Forms & Publications

rtment of Human Services

Project Request - DHS 1001

If you know any of the printing specifications for the project, you can enter them on the next page of this form. Otherwise, they can be filled in as you work with the OFDM designer.

	Date:	Your i	name:			
]	Unit:		Phone #:	()	ł	Ext.
ion	Billing Information: Agency	# Inc	lex:		PCA:	
Section	Billing address & contact p	person:				
	Project Name:					
on 2	This project is: A new form or publication A notice mailing					
	An existing form o	r publication (if not, "quanti	skip to ty needed")	Form #:		
ection	Last revision date:	Is t	his: 🗌 an e:	xact rep	rint? 🔲 a rev	ision?
S	(please send a copy of the current version) Is this for client use? 🗌 Yes 🗌 No					
	Quantity needed:	Date n				
Services needed from OFDM: writing design revising check				g 🗌 check red	ading level	
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5						
on 4	Deliver materials to: Distribution Services Other:					
Section 4	Should this be on the DHS Forms Web site?					
ion 5	Comments: (special instructions	s, etc.)				
Sectio						
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	-	Signa	ture		Date	
	Signature	Date	Signa	iture	Date	
OFDM use only Date received: OFDM assignment:						
	Form # assigned:	Color Exemptio	n:	QA o	completed:	

Forms & Publications Spec Sheet DHS 1001-A

(12/03)

Project:

OFDM Contact:

Printing spec	:S:				
Quantity	Date needed	Previous Order	# Date		
Electronic File	e: Name	Location:			
	Type of file: PDF Nat	ive files: Software program:			
Number of pa	iges F	inished size: X			
Print: One-	sided two-sided Po	rtrait 🗌 Landscape 🔲 T	'umble Head-to-head		
Paper: Stock no	ıme	Weight	Color		
	Carbonless number of pages:	Continuous	Unit set		
Cover sto	ck	Weight	Color		
Р	Print covers: Front: outside	inside Back: insid	le 🗌 outside		
Ink colors: Ins	side pages:				
Cover pages:	:				
Proof: Requested:	: No Yes Send to:	OFDM Other:			
Finishing: s	Stapling: Upper left tw	o left other:			
Drilling: 3	B-hole 2-hole top Othe	г:			
Fold:per san	nple other:				
Binding: s	Binding: saddle stitch paste fold other:				
Packaging:	Box Shrink-wrapnu	mber per packet:			
Distribution:	Initial distribution needed leddrafted by: OFDM	Distribution list sent to Mo customer Old sto			
Translations: Other:	Spanish Russian	Vietnamese Chinese	Korean		
Posting on DH	HS Forms Server: Postin	ng required: PDF Wor	rd Wordperfect None		
Other:					