



POLICIES AND PROCEDURES

SUBJECT: BILINGUAL BONUS PLAN

POLICY NO: 731

PURPOSE:

To provide a consistent and equitable policy governing ongoing monitoring of the Bilingual Bonus Plan that responds to the bilingual needs of the DHS facilities.

POLICY:

Bilingual Bonus compensation must be budgeted in the program/facility budget. Each Service Area Manager/Division Head or appropriate manager must annually, or more frequently, in the event of organizational and/or program changes, review their Bilingual Bonus Plan and budget.

The Bilingual Bonus Plan will specify a budget for Bilingual Bonus compensation and identify specific positions required to frequently use English and one of the threshold foreign languages identified as needed to effectively communicate with the public and patients served and ensure linguistic access to healthcare within DHS facilities.

All of the following criteria must be met in order to justify the need for assignment of Bilingual Bonus compensation. The employee must:

- Be on a permanent full-time position, or temporary or recurrent position (effective January 1, 1992)
- Be fluent in English and at least one of the threshold foreign languages identified as needed for that facility/program or service area
- Possess knowledge and sensitivity towards the culture and needs of the Non-English and Limited English Proficiency clientele of the service area
- Have passed a proficiency examination conducted by an authorized LA County Bilingual Examiner and possess a Language Proficiency Certificate
- Have a current performance evaluation on file in DHS Human Resources with an overall rating of competent or better
- Be required to fluently use the second language on a continuous and frequent basis
- The position must be allocated in the facility/program Bilingual Bonus Plan

In order to request Bilingual Bonus compensation for an employee the department/service manager must complete and submit a Request for Bilingual Bonus Compensation form to DHS Human Resources for review and approval.

APPROVED BY:

REVIEW DATES:

EFFECTIVE DATE: November 1, 2011

SUPERSEDES: February 12, 2002

DEPARTMENT OF HEALTH SERVICES COUNTY OF LOS ANGELES

SUBJECT: BILINGUAL BONUS PLAN

POLICY NO.: 731

If an employee is absent for more than 60 calendar days, the bonus shall be suspended. If the employee has a change in assignment, the frequent and continuous use of the second language criteria must be met or the bonus shall be discontinued.

It is the responsibility of the manager to inform the appropriate DHS Human Resources Office when the employee no longer qualifies and/or needs to be terminated from the bonus plan program.

GUIDELINES:

I. Compensation

Any person employed in a permanent full-time position, or in a temporary or recurrent position (effective January 1, 1992), may receive additional compensation at the rate established by the County Code Section 6.10.140 for the provision of bilingual interpretation services, if all of the following conditions are fulfilled:

- A. The Service Area Manager/Division Head or appropriate manager has designated that the specific assignment of the employee requires a fluency in both English and at least one of the threshold foreign languages identified for the service area – and – knowledge and sensitivity towards the culture and needs of the Non-English and Limited English Proficient clientele of the service area – and – the encumbered position has been approved for bilingual compensation in the facility/program Bilingual Bonus Plan.
- B. An authorized Bilingual Examiner has certified that the employee possesses and exercises a fluency in both English and the required foreign language or languages, and possesses and displays a knowledge of and sensitivity toward the culture and needs of the foreign language group involved. For the purposes of this policy, American Sign Language (AMESLAN) is deemed to be a foreign language.
- C. The employee must have a current performance evaluation on file with DHS Human Resources with an overall rating of competent or better.

II. Effective Date

Bonus compensation shall be effective for the pay period in which the employee's manager makes the findings required in Section I above and said findings are validated by the appropriate DHS Human Resources Office or designee. In no event shall such compensation be effective prior to the first day of the employee's assignment to the qualifying position – or – prior to the first day that the criteria in Section I above is fulfilled, irrespective of the date of the manager's request.

EFFECTIVE DATE: November 1, 2011

SUPERSEDES: February 15, 2002

PAGE 2 OF 3

**DEPARTMENT OF HEALTH SERVICES
COUNTY OF LOS ANGELES**

SUBJECT: BILINGUAL BONUS PLAN

POLICY NO.: 731

III. Duration

Authorization for an employee to receive Bilingual Bonus compensation will remain in effect only for as long as the employee:

- A. Continues to be assigned to the position and function that has been approved for bilingual compensation;
- B. Continues to effectively utilize both English and the designated foreign language(s) on a continuous and frequent basis, by determining fluency in both English and the required foreign language(s) – and – knowledge of and sensitivity toward the culture and needs of the foreign language group involved;
- C. Maintains a performance rating of at least competent, and
- D. The manager/supervisor annually re-certifies continuation of the bonus.

IV. Absences

Bilingual Bonus compensation does not constitute base rate pay. If the employee is absent for more than 60 calendar days, the Bilingual Bonus compensation provided under this policy shall be suspended. The supervisor must submit a new request form to reinstate the bonus once the employee returns.

V. Exclusions

Bilingual Bonus compensation, as allowed by this policy, shall not apply to persons employed in the position of Healthcare Interpreter (Item 1153), Interpreter (Item 1154), Sign Language Specialist (Item 1160), Supervising Sign Language Specialist (Item 1161) or Child Placement Coordinator (Item 9084).

VI. Not a Base Rate

The Bilingual Bonus compensation allowed by this policy shall not constitute a base rate.

AUTHORITY:

Los Angeles County Code Section 6.10.140
California Health & Safety Code Section 1259
Senate Bill 1840 (Chapter 672)

CROSS REFERENCES:

DHS Policies:

- 314.2, Documenting Use of Interpretive Services During Informed Consent Discussions
- 318, Non-English and Limited English Proficiency
- Applicable Memorandum of Understanding

EFFECTIVE DATE: November 1, 2011

SUPERSEDES: February 15, 2002

PAGE 3 OF 3



Health Services
LOS ANGELES COUNTY

DHS HUMAN RESOURCES

BILINGUAL PAY REQUEST - CERTIFICATION AND AUTHORIZATION

(GOVERNED BY 6.10.140 OF THE COUNTY CODE)

EMPLOYEE'S LAST NAME		FIRST NAME		M.I.	EMPLOYEE NO.	EMPLOYEE PHONE NUMBER	EXT.
DEPARTMENT #		BUDGET CODE	PAY LOC NO.	PROGRAM / UNIT / DIVISION - DO NOT USE ABBREVIATIONS(include mailing address)			
ITEM NUMBER	LETTER	EMPLOYEE'S CLASSIFICATION TITLE		WORK SHIFT	SPECIFIC JOB ASSIGNMENT		
<input checked="" type="checkbox"/> FIRST REQUEST FOR BILINGUAL BONUS PAY		RE-APPLICATION FOLLOWING INCUMBENT'S CHANGE OF STATUS OR FOLLOWING A CONTINUOUS ABSENCE OF 60 DAYS		IF REPLACEMENT: NAME, EMPLOYEE NO., ITEM NO. OF FORMER INCUMBENT OF ASSIGNMENT		IS POSITION LISTED ON THE BILINGUAL PAY PLAN? (Attach a copy of Plan)	
<input type="checkbox"/> REPLACEMENT OF FORMER INCUMBENT OF REQUESTED ASSIGNMENT						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
LANGUAGE REQUIRED:	LANGUAGE PROFICIENCY TEST SUCCESSFULLY COMPLETED ON: (ATTACH COPY OF CERTIFICATE)		AVERAGE LENGTH OF TIME LANGUAGE WILL BE USED		PLEASE SCHEDULE EMPLOYEE FOR LANGUAGE PROFICIENCY EXAMINATION		SKILL REQUIRED:
			HRS. PER DAY		<input type="checkbox"/> YES <input type="checkbox"/> NO		READ <input type="checkbox"/>
			HRS. PER WEEK		DATE		WRITE <input type="checkbox"/>
WHY IS LANGUAGE SKILL REQUIRED IN THIS ASSIGNMENT? (Be specific, provide quantitative data)							
PERSON TO CONTACT FOR ADDITIONAL INFORMATION					TEL. NO. () -		EXT.
WILL THE EMPLOYEE BE AVAILABLE TO PROVIDE INTERPRETATION SERVICES FOR OTHER AREAS?							<input type="checkbox"/> YES <input type="checkbox"/> NO
SUPERVISOR'S RECOMMENDATION: <input checked="" type="checkbox"/> RECOMMENDED <input type="checkbox"/> NOT RECOMMENDED							
SUPERVISOR'S NAME		SUPERVISOR'S CLASSIFICATION TITLE			SUPERVISOR SIGNATURE		
<p>Authorization for the employee to receive Bilingual Bonus Pay will remain in effect only for as long as the employee meets the following conditions:</p> <ul style="list-style-type: none"> - Maintains a performance evaluation rating of competent or better. - Continues to be assigned to both the position and function that requires fluency in a second language and has been approved for bilingual compensation. - Has not been on leave for over 60 consecutive days. 							
DEPARTMENTAL CERTIFICATION							
<p>I HEREBY CERTIFY THAT THE ABOVE NAMED EMPLOYEE'S ASSIGNMENT REQUIRES FLUENCY IN ENGLISH AND THE NAMED FOREIGN LANGUAGE. I FURTHER CERTIFY THAT THE NAMED EMPLOYEE NOT ONLY POSSESSES THE REQUIRED FLUENCY IN THE FOREIGN LANGUAGE INDICATED BUT, IN ADDITION, POSSESSES BOTH A KNOWLEDGE AND A SENSITIVITY TO THE CULTURE AND THE NEEDS OF THE FOREIGN LANGUAGE POPULATION THIS DEPARTMENT SERVES. THE ABOVE NAMED EMPLOYEE UNDERSTANDS THAT THE REQUESTED ADDITIONAL COMPENSATION CAN NOT BE PAID FOR ANY TIME PRIOR TO THE FIRST OF THE MONTH, IN WHICH BOTH THE DEPARTMENT HEAD AND THE DIRECTOR OF HUMAN RESOURCES HAVE FOUND THE EMPLOYEE'S ASSIGNMENT QUALIFIES FOR THE BONUS, OR THE ACTUAL DATE OF ASSIGNMENT, WHICHEVER IS LATER.</p>							
<p>Send original with copy of the incumbents language proficiency certificate to: DHS HR, Personnel Services, Bonus Unit 5555 Ferguson Drive, Rm 120-15 Commerce, CA 90022</p>							
					DEPARTMENT HEAD / DESIGNATE		DATE
TO BE COMPLETED BY DHS HUMAN RESOURCES							
<input type="checkbox"/> APPROVED		EFFECTIVE DATE: _____					
<input type="checkbox"/> DENIED		HUMAN RESOURCES DIRECTOR / DESIGNATE				DATE	
<input type="checkbox"/> RETURNED WITHOUT ACTION PER TELEPHONE CONTACT							
WITH _____ DATE _____				CWTAPPS ENTRY CONFIRMATION			