

Sign Language Interpreter Desk Aid & Checklist

A sign language interpreter should be provided in response to all requests, generally within 2-3 days, when requested by a customer who is Deaf, or because of a speech disability. Only a licensed interpreter can be used to provide sign language interpreting services per RSMo 209.321.1.

A customer is never responsible for providing his or her own disability accommodation or interpreter. For example, a customer should not be asked to bring or use a family member or friend who can provide sign language or other language interpreting to access Job Center services.

The Job Centers' procedure for obtaining a *licensed* American Sign Language (ASL) interpreter or other sign language interpreting for any customer who needs or requests an interpreter is outlined below. If you have any questions, please contact Kristin Funk, DWD Disability Coordinator, 573-751-1098 or kristin.funk@ded.mo.gov.

1. Record the customer's name, contact information and required meeting time & date or availability for meeting during the next 3 days. See Checklist form (p.3)
2. If the customer can wait for you to contact the interpreter agency and schedule the appointment, go to step 4 or contact Kristin Funk for assistance by phone at 573-751-1098.
3. If not, make certain that you have the customer's contact information to schedule the appointment after you identify an interpreter who is available.
4. Go to: <http://archive.oa.mo.gov/purch/contracts/>

Scroll down to **4. Search by Contract Type**, Select the radio button for **"Statewide Professional Service Contracts"**, Select **"Communication and Support Services"** and click Submit

Scroll down to **"Interpreting Services for People with Hearing Loss"** and click the **"Contract number"** hyperlink to the right of the title (any hyperlink will go to the contract).

Select PDF or Word Format

Find your county on the alphabetical list of counties where the interpreter is needed (pages 6-28). You will not need the Advanced or Master levels unless you have a specialized project that requires this (see 2.4.1 page 77-78).

Note: The interpreter agency may send an Advanced or Master Level interpreter, but your contracted rate is based on the level of interpreter you request—"Basic Level (3)".

Identify the low-cost, Basic Level (8-5 p.m.) hourly rate, Vendor for your county (p.6 -28).

Match the vendor to the list of vendors and their contact info on pages 1-3.

5. Call and inform this interpreter agency (vendor) that you are using the State Contract to obtain services. Request a “Basic Level 3 - Interpreter” to be provided on a given date and time that has been jointly arranged with the customer and staff.

Confirm the contracted hourly rate and that there are no additional charges. (The contracted hourly rates listed are a flat hourly rate. No additional charges for travel, travel time or mileage are allowed unless services are provided outside of awarded counties as listed on pages 6-28. (2.7.6.a page 80).

The contractor/interpreter will be paid for a minimum of 2 hours even if their services are required for less than 2 hours or if the state agency cancels with less than 24-hour notice. It is important to let the customer know when the interpreter has been confirmed and exactly what timeframe to expect. (2.7.3.c. on page 79)

When the interpreter arrives, ask to see their Missouri State Sign Language Interpreter’s license in order to make a copy for your records. The copy can be kept in order to document the interpreter’s credentials. (2.3.4.a. on page 77)

Track the amount of time that the interpreter is there (2.7.3.a. on page 79) and ask to make a copy of the interpreter’s license to keep on file. This is proof that a Missouri licensed interpreter was used. You can also search <https://renew.pr.mo.gov/licensee-search.asp> to check the list of Missouri licensed sign language interpreters.

Remember that **you are communicating with your customer, not the interpreter. Look at your customer, rather than the interpreter.** Be certain to address your customer directly when you speak, for example, **don’t** say “tell him” or “tell her”. **Speak directly to your customer** in your usual manner; there is no need to speak slowly or loudly. Make the most of your time and **use facial expression and body language to help convey your message.** You will need to provide a clear line of vision for your customer, the interpreter and yourself. A conference table or office with adequate space may work best.

Sign Language Interpreter Checklist **(Confidential)**

(Complete the following to ensure that effective services are provided to anyone requesting a sign language interpreter.)

Customer Name _____

Customer's Contact Information (email/phone/text) _____

Day(s) & Timeframe(s) customer is available for appointment:
(Example: Tuesday, March 11 at 8am – 4pm; Wed & Thursday 10-2pm)

Contact Interpreter Agency (Instructions are on pages 1 - 2 of the Desk Aid)

Low cost Agency's Name _____

Phone # _____

Agency's office contact person _____

Interpreter's Name & Cell phone #: _____

Agency available? (Y / N), (If not available, record reason and contact next agency to ensure 2-3 day turnaround)

Confirm the state contract's cost per hour (x2-hour min) \$ _____

Request a written confirmation of appt date/time & location using state contract

Email the Job Center's address, phone #, directions & contact staff person to the Interpreter and get contact info and telephone # for the interpreter.

Date and Timeframe of appointment (Interpreter confirmed) ____ / ____ / ____ : ____ - ____ : ____

Date and Timeframe Confirmed with Customer by: Email, Phone, In Person

Office Use

Date _____ Staff Name _____

Notified Functional Leader or Designee by: email / phone / in-person/ _____

Planned Meeting's Attendees and Staff _____

Planned Services Welcome / Skills / Jobs / EUC / Workshop / Resume/Other:
(Forward this form to the Functional Leader)

Day of Meeting:

Interpreter's Name _____ Copy of Interpreter License (Y / N)

Time Started / Completed _____

Applicant ID/Future Appointment date _____

***Form should be maintained according to DWD Confidentiality Policy 01-2008, Change 2. Keep this form in a locked cabinet, separate from the job seeker file.*

For additional information about Missouri Division of Workforce Development services, contact a Missouri Job Center near you. Locations and additional information are available at jobs.mo.gov or 1-888-728-JOBS (5627).

Missouri Division of Workforce Development is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Missouri TTY users can call (800) 735-2966 or dial 7-1-1.

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