State of Washington

DEPARTMENT OF GENERAL ADMINISTRATION

**Office of State Procurement**

*Rm. 201 General Administration Building, P.O. Box 41017 ⚫ Olympia, Washington 98504-1017 ⚫ (360) 902-7400*

[*http:**//www.ga.wa.gov*](http://www.ga.wa.gov)

REQUEST FOR PROPOSAL (RFP)

**TRANSLATION (WRITTEN WORD) SERVICES**

|  |  |  |
| --- | --- | --- |
| *Contract Number* | *Pre-Proposal Meeting Date & Time* | *Proposal Due Date & Time* |
| **09505** | **August 2, 2006 – 9:00 TO NOON.** | **August 16, 2006 - 2:00 PM.** |

***bids must be received & Stamped on or before the opening date & time at this location:***

**210 11th AVe SW, Rm. 201, General Administration Building Olympia WA 98504-1017**

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For a site map to the Capitol Campus, click <http://access.wa.gov/government/images/campus_map.jpg>.

Driving directions and parking information <http://www.leg.wa.gov/common/maps/parking.htm>

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# ANNOUNCEMENT AND SPECIAL INFORMATION

Bidders are required to read and understand all information contained within this entire proposal package. The Competitive Procurement Standards, which are referred to in this bid package are not automatically printed or sent out with this RFP. By responding to this RFP the bidder agrees to read and understand these documents. These documents are available on our website at <http://www.ga.wa.gov/pca/cps.htm>.

In support of the State’s economic and environmental goals, we encourage you to consider the following elements in responding to our bids. These are not a factor of award (unless otherwise specified in this document):

* Using environmentally preferable products and products that exceed EPA guidelines
* Supporting a diverse supplier pool, including small, minority, and women-owned firms
* Featuring products made or grown in Washington

## 1.1. PUBLIC DISCLOSURE

Bid information, including price sheets, will not be available for public disclosure until after award of the contract. At the time of bid opening, only the name of the bidder and time of bid receipt will be read aloud.

## 1.2. purpose

The purpose of this RFP is to establish a MANDATORY contract for the purchase of TRANSLATION SERVICES by the DEPARTMENT OF SOCIAL & HEALTH SERVICES (DSHS). The established contract will also function as a CONVENIENCE contract for all other authorized purchasers such as the Department of Labor & Industries, Health Care Authority, Department of Health, Employment Security, and Department of Transportation who have expressed an interest in this contract. It is the state’s intent to award to multiple contractors as outlined in Section 4 of this RFP.

## SCOPE

The Department of Social and Health Services (DSHS), through Title VI of the Civil Rights Act of 1964, RCW 74.04.025, other legal mandates and agreements, and department policies, provides equal access to department programs and services, for all persons including those who are limited English proficient (LEP). The intent of this contract is to obtain quality translation services for DSHS, as well as other state agencies and other participating entities in the State of Washington.

Translation contractor(s) awarded this contract will be required to manage a high volume of translation requests and to deliver high quality, timely translated documents that are linguistically accurate, culturally appropriate and technically consistent with the original document. Translation requests maybe for social, medical, legal, chemical and/or technical terminology documents.

Contract will be awarded by category with possible multiple awards completed for each translation category within the two modules.

The scope of the procurement for Statewide Translation Services consists of the following modules:

* Module 1: Department of Social and Health Services (DSHS) five (5) specific categories:
  1. Category 1: DSHS Forms
  2. Category 2: DSHS Publications
  3. Category 3: Supported Language ACES Text
  4. Category 4: Other General DSHS Informational Documents
  5. Category 5: Client Specific/Locally Generated Documents
     + Module 2: All other state agencies, institutions of higher educations, and political sub-divisions and non-profit organizations that are part of the Washington State Purchasing Cooperative members, four (4) specific categories:

1. Category 5: Forms, Pamphlets and Brochures
2. Category 6: Letters and Notices
3. Category 7: Technical documents (MSDS, Chemical Hazard, Technical Surveys, etc)
4. Category 8: Labels and Miscellaneous (videos, posters, etc.)

## 1.4. Pre-Bid Conference

An OPTIONAL conference to address contractual requirements will be held at the time and location indicated below. While participation is not mandatory, it is strongly encouraged. If changes are required as a result of the conference, written bid addenda will be issued.

|  |  |
| --- | --- |
| **Pre-Proposal Conference Date:** | **August 2, 2006** |
| **Pre-Proposal Conference Time:** | **9:00 am to 12:00 pm** |
| **Pre-Proposal Conference Location:** | **Office of State Procurement**  **General Administration Building Room 201**  **Corner of 11th and Columbia**  **Olympia Washington 98504-1017** |

**Note:** Assistance for disabled, blind or deaf or hard of hearing persons who wish to attend is available with pre-arrangement through the Office of State Procurement (OSP). Contact the State Procurement Officer identified on the face page of this document.

## 1.5. Estimated Usage

It is estimated that purchases over the initial two-year term of the contract for the purchase of TRANSLATION SERVICES will approximate **$4,000,000** for both modules. The following are estimated translation requests, per year, by translation category:

|  |  |
| --- | --- |
| Modules/Category | Estimated Requests per Year |
| **MODULE 1 (DSHS)** |  |
| Category 1 – DSHS Forms | 800 |
| Category 2 – DSHS Publications | 400 |
| Category 3 – Supported Language ACES Text | 200 |
| Category 4 – Other General DSHS Informational Documents | 200 |
| Category 5 – Client Specific/Locally Generated Documents | 34,000 |
| **MODULE 2 (Other Authorized Purchasers**) | (may be updated via amendment) |
| Category 6 – Forms, Pamphlets & Brochures | 50 |
| Category 7 – Letters & Notices | 200 |
| Category 8 – Technical Documents | 30 |
| Category 9 – Labels & Misc. | 10 |

Estimated usage data as stated herein shall not bind the state to the purchase of said quantities. Estimates are based on past usage. The State does not guarantee any minimum purchase.

## 1.6. Purchasers

1.6.1. The primary purchasers will be Department of Social & Health Services, Department of Labor and Industries, Employment Security Department, Health Care Authority, Department of Health, Higher Education Coordinating Board and State Purchasing Cooperative Members. The contract will be made available to all state agencies statewide.

1.6.2. Purchasing Cooperatives:

In addition to state agencies and institutions of higher education, political subdivisions which include towns, municipalities and K-12 schools, currently utilize the statewide price agreements awarded by the state. These entities, members of the Washington State Purchasing Cooperative, make purchases of translation services that could significantly increase the contract value. It is the state’s goal to encourage the cooperative members to use the statewide price agreement(s) resulting from this RFP. Increased utilization by cooperative members significantly enhances the business opportunity for the awarded contractor(s). All Cooperative members using the statewide agreements are to follow the contractual terms and conditions specified in those agreements. The state accepts no responsibility for payment by WSPC.

1.6.3. Nonprofit Corporations

Legislation allows nonprofit corporations to participate in state contracts for purchases administered by OSP. By mutual agreement with OSP, the contractor may sell goods or services at contract pricing awarded under this contract to self certified nonprofit corporations. Such organizations purchasing under this contract shall do so only to the extent they retain eligibility and comply with other contract and statutory provisions. The contractor may make reasonable inquiry of credit worthiness prior to accepting orders or delivering goods or services on contract. The state accepts no responsibility for payments by nonprofit corporations. Their use of the contracts may significantly increase the purchase volume. Their orders are subject to the same contract terms, conditions and pricing as state agencies.

1.6.4. Based upon contractor’s agreement (see section 7.2), the contract will be made available to political subdivisions and non-profit organizations which are members of the State of Washington Purchasing Cooperative (WSPC). A list of Washington members is available on the Internet <http://www.ga.wa.gov/servlet/PCACoopListSv> Contractors shall not process state contract orders from unauthorized purchasers.

## 1.7. Term

The initial contract award shall be for twenty-four (24) months starting from date of award, with the option to extend the contract for additional terms or portions. Extensions will be subject to mutual agreement. The total contract term will not exceed 6 years.

## 1.8. Definitions

The following definitions are in addition to those listed in the Competitive Procurement Standards:

**1.8.1. ALL INCLUSIVE RATE (DSHS ONLY)**

For this RFP, Module 1 only, the flat rate per English word charge or a flat rate per job charge regardless of whether or not the translation requires formatting, paste-up or other technical adjustments. The method used in word counting will be the same as that used by most computer software programs.

**1.8.2. AUTHORIZED PURCHASERS**

Unless otherwise restricted by the Request for Proposal, includes all members of the State of Washington State Purchasing Cooperative (WSPC) Program: State agencies, Political subdivisions of Washington, Qualified Non-profit Corporations, Institutions of higher education (e.g. College and Universities, Community and Technical Colleges) who elected not to purchase independently under RCW 23.B.10.029.

**1.8.3. BUSINESS DAY**

Days of the week excluding weekends and state holidays; namely, New Year’s Day, Martin Luther King Jr. Day, President’s Day, Memorial Day, Labor Day, Independence Day, Veterans’ Day, Thanksgiving day, the day after Thanksgiving day, and Christmas.

**1.8.4. CERTIFICATED LANGUAGES**

* + 1. .

Certificated languages are languages for which the Department of Social & Health Services (DSHS) and American Translators’ Association (ATA) certify translators.

**1.8.5. CERTIFIED TRANSLATOR**

A translator who has passed the DSHS Language Testing and Certification (LTC) translator certification examination (currently available in the following languages: Cambodian, Chinese, Korean, Laotian, Russian, Spanish, and Vietnamese) or has passed the American Translators Association (ATA) examination (currently available in the following languages: Chinese, Croatian, Dutch, Finnish, French, German, Hungarian, Italian, Japanese, Polish, Portuguese, Russian and Spanish.)

**1.8.6. CODE OF PROFESSIONAL CONDUCT**

DSHS established performance standards to be met by interpreters and translators when providing language services to DSHS programs and clients. This Code of Professional Conduct will also be reflected for any other authorized contract customer. (**Attachment A**).

**1.8.7. DSHS Language Testing and Certification Program (LTC)**

This is a DSHS program that provides bilingual testing and certification services.

**1.8.8. NON-CERTIFICATED LANGUAGES**

These are languages for which DSHS/LTC or ATA do not certify translators.

**1.8.9. PRINCIPAL LANGUAGES**

The most frequently requested languages for each category of translation work.

**1.8.10. QUALIFIED TRANSLATOR**

Translator who has passed a qualification/screening test, in a non-certificated language, offered through other translator testing programs or translation vendor(s)

**1.8.11. SUBCONTRACTOR**

A Subcontractor is an individual, company, corporation, firm, or combination thereof with which the Contractor develops sub-contracts, for the purpose of performing services under this contract. This clause does not include contracts of employment between the Contractor and personnel assigned to work under this contract.

**1.8.12. TRANSLATION**

Translation is the written transfer of a message from one language to another.

**1.8.13. TRANSLATION VENDOR(S)**

Translation vendor(s) are the company(s) or contractor(s) awarded this contract for foreign language translation services.

**1.8.14. TRANSLATOR TESTING PROGRAMS**

Programs other than DSHS, ATA, and translation vendor(s) that administer foreign language translator tests such as, but not limited to, translator training programs of an academic institution.

# SPECIFICATIONS

Bidders submitting proposals for consideration must meet the standards outlined below. By signing the Offer and Award (Section 7.1) Bidders are agreeing to meet these standards. Failure to meet these requirements may result in rejection of proposal or termination of contract.

## 2.1. Bidder Qualifications

Requirements **(These requirements pertain to all categories of work)**

Bidders must have:

* At least two certified or qualified translators available in each “Principal Language” identified in the translation category being bid.
* A minimum of two years of experience in the translation business.
* Computer software capacity to meet specific translation category requirements, and anti-virus software.
* Technological capability to produce electronic files and hard copies of documents to meet specific translation category requirements.
* A database that will electronically track translation projects and generate reports, including status reports.
* A toll-free fax service.
* Essential staffing and equipment in order to respond to each request for translation within the required timeframes as outlined in each category.
  + - A billing system that accurately details the costs for each translation project as outlined in each category.
* An emergency recovery plan.
  + **Note:** Bidders must submit a copy of their emergency recovery plan with their bid response. The emergency recovery plan will not be included in the bid evaluation; however, providing a copy will be part of bid responsiveness.

# Translation Modules & Categories

Bidders shall submit proposals for the provision of translation services for one or more categories of translation work in the two modules indicated. To ensure quality and timely services, multiple contracts may be awarded to qualified translation vendor(s) for each category. Module One is DSHS only and contains Categories 1 through 5. Module Two is for all other state agencies and purchasing cooperative members and contains Categories 6 through 9.

3.1. MODULE 1 DSHS ONLY

Bidders submitting proposals for consideration must meet the standards outlined in the following Translation Requirements, and specific translation service category requirements. Bidders that do not agree to meet these minimum qualifications will not be considered eligible for contract award.

3.1.1. TRANSLATION REQUIREMENTS

Translation vendor(s) shall:

* Accept or decline the translation project via e-mail, fax or voice mail to the requester within 4-business hours of receiving a request for translation. Any project not accepted by the contractor must be accompanied by an explanation of why the contractor is not able to complete the project. Failure to accept translation projects, for any reason, will be tracked by DSHS and used to determine contract compliance and future awards.
* Be responsible for all costs associated with performing translation services under this contract. These associated costs include staff time for processing translation requests, purchase, operation and maintenance of office equipment, purchase, operation and maintenance of computer hardware and software, toll-free fax service, and postage. Reproduction and duplication of completed translations shall not be the responsibility of the translation vendor.
* Have a formal method (e.g., test) for assessing the skills of translators who will provide services under this contract. Each vendor’s method will be reviewed and approved by DSHS prior to the vendor providing services under this contract.
* Use translators who are certified or qualified as defined in this document. **Note:** Translators who translate into the following seven languages must be certified by DSHS or ATA: Cambodian, Chinese, Korean, Laotian, Russian, Spanish, and Vietnamese. Translators who translate into all other languages can be either certified or qualified.
* Ensure that a single translator is used to complete each document to ensure continuity and consistency in terminology, syntax, and style.
* Translate documents at the same reading level as the source material.
* Use English as the base language for calculating the per word cost of each translation.
* Contact the requester with any questions regarding terminology used in the source document.
* Use the approved language code, as identified on the DSHS Written Language Codes listing, when abbreviating language names (**Attachment C**).
* Use Unicode fonts supported by Microsoft 2000 or higher for PC based computers and/or MAC OS 9.2 or higher for Macintosh computers unless specified otherwise within a specific category of work.
* Review each translation prior to delivery to the requester to ensure that the translated document is linguistically accurate and consistent with the formatting and technical specifications of the original document. The project will **not** be considered complete if any inaccuracy or inconsistency is found. The additional time used for correcting the translation file(s) will become a part of the total time used to complete the project.
* Correct, at no cost to the requester, any errors in formatting or translation identified by the requester. Costs associated with mass duplication of translated documents, which are found to be materially inaccurate after mass duplication, will be the responsibility of the contractor.
* Use Translation Correction Guidelines, issued by DSHS, when reviewing and responding to comments that are the result of translation accuracy reviews conducted by DSHS or are the result of comments from end users (**Attachment D**).
* Submit the following project delivery information with completed projects:
* the date the project is returned to the requester;
* the name of the translator who translated the document;
* the name of the reviewer who reviewed the translated document for accuracy and
* have available (for submittal upon request) all documentation from the review process;
* and any other comments/information related to the project.
* Submit invoices to requesters for verification and payment. Requester will not make payment on any invoice until all information is verified and/or corrected by the translation vendor (and/or an electronic facsimile has been provided if requested).
* Submit cost reports for Categories 1, 2, 3, and 4 electronically on a quarterly basis. These reports shall reference the report period and the translation vendor’s name at the top of the page. Each Category shall be submitted as a separate report sorted by DSHS Administration and by language. Each quarter’s report is due, electronically, to designated DSHS program managers (to be identified at time of award), by the end of the month following the report period (e.g., reports for services provided April through June are due by the end of July).

**Note:** Information regarding the required Category 5 report is provided in the ***Category 5 – Specific Requirements*** section of this document.

* Maintain “live” files (e.g., MS Word) of all projects they complete under this contract. If upon request for revision of a previously translated document, the contractor does not have the translated files, the contractor will be responsible for reproducing the translations at their own cost (i.e., DSHS will treat it as a revision and only pay for the new text to be translated.)
* Return any request, received directly from field offices**,** for complete translation of DSHS form or publication. These requests shall be returned with a note stating the project must be processed.
* Meet with DSHS and/or other Department of General Administration (GA) upon request (a minimum of one time per year) to review compliance with the terms of the contract and to discuss service performance issues. Any performance issues throughout the year that cannot be resolved by the requester and the contractor will be forwarded to OSP for corrective action.
* Require translators they employ or sub-contract with to read and abide by the Code of Professional Conduct.
* Translation vendor(s) shall provide orientation within 30 days to each new employee or subcontractor. At a minimum orientation should include the Code of Professional Conduct and contract 09505 requirements. Certifications are to be issued to employees and subcontractors indicating completion of the orientation and records are to be maintained of employees and/or subcontractors who have received the orientation.

**Categories 1 – 4 Typical Translation Work Required By DSHS**

Requests for translation services in these categories of work will come from DSHS headquarters offices. Field offices are not authorized to request translations through these categories of work (see Category 5 for field office requests). Most DSHS requesters will be using the DSHS automated translation tracking system to request translation services through these categories of work. This tracking system automates the processes used to request and transfer translation projects between requesters and contractors. Translation vendor(s) will be required to upload and download documents from a DSHS server. An overview of the tracking system, including system specifications, will be presented at the pre-proposal conference. Some requesters may submit their request using the General Translation Services Request form (DSHS 17-099) (**Attachment E**). All requests, regardless of how they are made, will include the information outlined on the attached General Translation Services Request form.

DSHS will pay a fixed minimum charge for requests of 75 words or less. Translation vendors are advised that there may be requests that require formatting only. For purposes of these categories, formatting involves manipulation of text that does not require translation. For requests of this nature, the minimum charge will be paid for each request.

In the event DSHS decides that their translated documents need to be transferred into another font or into another software, DSHS will pay a per word rate for “re-keying” the text using the new font. Documents that are re-keyed using a new font must be reviewed for accuracy.

Word counts for these categories of work vary from one word to thousands of words. Based on historical data, the percentage of word counts for translation requests in these categories of work are estimated as follows:

* + 20% are 1 to 75 words.
  + 65% are 76 – 2000 words.
  + 15% are over 2000 words.

**Categories 1 – 4 Turnaround Timeframes**

* Translation projects are to be completed in:
* Ten (10) business days, from the date of request for “normal” timeframe translation requests; and
* Five (5) business days or less, from the date of request for “rush” timeframe translation requests. Rush timeframes will be negotiated (one to five business days) at the time of request, taking into consideration the size of the document that needs to be translated, how quickly it is needed, and what languages are being requested.
* Translation projects that are not accepted by the first contractor offered the project will be offered to another authorized contractor (if available). If none of the contractors can complete the project in the required timeframes, the requester may go back to one of the contractors to negotiate a longer timeframe to complete the project.
* All requests received by translation vendor(s) after 12:00 PM (noon) shall be considered “received” the next day’s business, excluding weekends and holidays.
  + **Note:** For all categories, timelines for translation services will begin on the day the request is “received” by the translation vendor and end on the day submitted. Mailing time to and from the requesting DSHS facility is not included.

**Categories 1 – 4 Billing Specifications**

* One invoice shall be submitted to the project billing contact person for each translation project. In addition to the requirements outlined in the Invoicing Section of the Special Terms and Conditions, each invoice shall include the following:
* the title of the document;
* the DSHS document number (if applicable);
* the DSHS Project Number;
* the project priority (Normal or Rush);
* the date the translation project was received by the translation vendor;
* the date completed translation work was delivered to the requester;
* the language(s) the document was translated into;
* the English word count for the document that was translated;
* the rate or cost per word; and
* the total charge for the project, itemized by language.
* Translation vendor(s) will receive full compensation for completed[[1]](#footnote-1)\* projects returned within the required timeframes.
* Translation vendor(s) will receive compensation for completed\* projects returned late (after the required timeframes) according to the following compensation table:

|  |  |  |
| --- | --- | --- |
| Project Return:  Business Days Late | **Compensation % of**  **Contract Rate:**  **Normal Timeframe** | **Compensation % of Contract Rate:**  **Rush Timeframe** |
| 1 | 90% | 75% |
| 2 | 80% | 50% |
| 3 | 70% | 25% |
| 4 | 60% | No Compensation |
| 5 | 50% |  |
| 6 | 40% |
| 7 | 30% |
| 8 | 20% |
| 9 | 10% |
| 10 | No Compensation |

Most Category 1-4 projects requested by DSHS will be requested using the Automated Translation Tracking System. For projects that are requested through this system, please note that upon submittal of the last language translated document for a given translation project, these translation projects will be date and time stamped by the Tracking System. If upon receipt of the requested language documents it is determined that any of the documents are “technically inaccurate”, the date and time stamp will be changed to the date and time in which technically accurate documents are delivered.

**3.1.1. Category 1**

Translation of written materials in this category will be for official DSHS numbered **forms**

(One example-**Attachment F**) as defined in DSHS Administrative Policy 11.02.

The majority of the language requests will be in the following languages – Cambodian, Chinese, Korean, Laotian, Russian, Somali, Spanish, and Vietnamese. **These languages are the “Principal Languages” for this category of work**.

**3.1.1.1 Category 1 Volume**

DSHS currently makes approximately 800 DSHS forms translation requests per year. One document that is requested to be translated into five (5) languages is considered to be five (5) translation requests.

**3.1.1.2 Category 1 Specific Requirements**

In addition to the requirements listed herein, translation vendor(s) shall:

**Comply with the following technical standards and design requirements set forth by DSHS Forms and Records Management Services:**

* Electronically produced forms will typically be done using a PC Compatible format.

(Note: The State of Washington is in the process of conducting a procurement for a new form designer software that will be available for use by all state agencies sometime during the term of this contract. Each Category 1 awarded translation vendor will be informed of the change in software as soon as information regarding the new form designer software is available.)

* Translated forms shall match the format and design of the original English document as much as possible. Text formatting shall be exact, including tabs, indentations, bullets, margins, and copy justification, and shall remain consistent in leading, fonts and sizes throughout each document.
* Text in fields shall be small enough to accommodate fill-in for the fields.
* PDF files are required.
* Multiple foreign language font technology shall be available for all languages to be translated. Foreign language fonts shall not be mixed within one document unless requested.
* Forms shall have a state agency logo, title, and coding line unless specified otherwise.
* Most titles appear at the top of the form with the exception of a few forms where the title appears in the lower left corner and all Division of Child Support (DCS) forms where the title appears both at the top of the form and in the lower left-hand corner. Only the title that appears at the top of DCS forms needs to be translated. Those forms where the title appears only in the lower left corner require the translation to appear with the English at the bottom of the page.
* Titles appearing in the lower left-hand corner that require translation will be designated as such with the request submitted through the DSHS automated translation tracking system or on the General Translation Services Request form (or its equivalent). Titles translated at the bottom of forms are to be in 8 point plain or the next largest size readable in a given font.
* Translated forms requiring hole-punching shall conform to electronic template provided and all languages shall adhere to designated hole-punch areas.
* Observe window envelope format designations exactly as provided on the electronic template.
* **Note:** Window envelope formats adhere to U.S. Postal Service standards for the appropriate window envelope. If text other than the address appears in the window area, postal scanning equipment will reject the letter for hand sorting which may cause delays or loss of benefits to clients. It is important that the fold line appear below the lower left corner of the window to ensure the form is folded correctly to fit the envelope.
* Proper names, Addresses, telephone numbers, fax numbers, WAC codes, etc. shall be left in English.
* Some forms require translations and English text to appear on the same page. In those instances, the translated text should appear above the corresponding English text. Forms and Records Management will leave appropriate space above the English text to accommodate translations.
* Form numbers, language designation codes, and revision dates (in that order) shall be printed in the lower left-hand corner of each page in 7 point bold, i.e. **DSHS 14-123 CA (REV.01/2000)…** Use the revision date supplied on the electronic template. **Do not change this date**.

Do Translate:

* Form titles shall be in English **and** translated, with the English title placed directly under the translated title. Most titles appear at the top of the form and are to be translated in 12 point bold unless otherwise noted (with the exclusion of lower left titles).
* Section headings. “For Office Use Only” should be translated as well as in English.

Do Not Translate:

* Text that is part of a logo.
* The name of the agency, division or office appearing at the top of a form unless specified otherwise.
* Boxes in the upper right-hand corner for information including CSO name, telephone number, case name or number and date which are used by the field staff unless specified otherwise.
* Proper names, addresses, telephone numbers, fax numbers, WAC codes, etc.
* Areas that are designated “For Office Use Only”.

**3.1.2. Category 2**

Translation of written materials in this category will be for DSHS **publications** (see example, **Attachment G**) as defined in DSHS Administrative Policy 2.07.

The majority of the language requests will be in the following languages – Cambodian, Chinese, Korean, Laotian, Russian, Somali, Spanish, and Vietnamese. **These languages are the “Principal Languages” for this category of work**.

**3.1.2.1 Category 2 Volume**

DSHS currently makes approximately 400 DSHS publications translation requests per year. One document that is requested to be translated into five (5) languages is considered to be five (5) translations requests.

**3.1.2.2 Category 2 Specific Requirements**

In addition to the requirements listed herein translation vendor(s) shall:

**Comply with the following technical standards for DSHS publications required by DSHS Publications Management:**

* Translation of any new or revised DSHS Publication shall be made using the electronic files supplied by DSHS Publication Management (PM). No files from any other source should be used. All translation publication files must be sent to Publications Management only; no other recipient will receive publication translations, unless requested or approved by DSHS Publications Management.

All translated publications files must be sent to Publications Management only, no other recipient will receive publications transactions, unless requested or approved by the DSHS Publications Management.

* All translated publications shall be produced using the language-specific fonts identified in the Foreign Language Font Specifications that will be provided at the mandatory Pre-Proposal Conference
* All electronically-produced publications shall use one of the following MACINTOSH applications (The instructions included with the General Translation Services Request form {or its equal} will specify which application to be used): Adobe InDesign CS2, Adobe Illustrator CS2, Adobe Freehand MX, Microsoft Word (Office 2004).
  + Note: Some publication requests will be sent with 2 English source document files, one in InDesign and one in MS Word. The contractor will be required to translate the MS Word file and return it to Publications Management within the contractual timeframes. This document will go through usability testing. Any edits identified through this review process will be forwarded back to the contractor. The contractor will use the Translation Correction Guidelines (Attachment D) to finalize the translation and format it into the InDesign file.
* Currently, the Vietnamese fonts used for DSHS publications do not reveal and print correctly in InDesign CS2, only in CS version. Publications Management is researching Vietnamese fonts for use in InDesign CS2. Therefore Vietnamese translations should be completed in InDesign CS until new Vietnamese fonts can be tested in CS2 and purchased. The translation vendors will be contacted about testing these fonts also.
* Unless specified by the Publications Management, the translated text cannot be a PICT, TIFF, EPS, or scrapbook file that has been placed into an InDesign document.
* Follow format (spacing, placement, column width, etc.) of original document closely when laying out. Do not replace or change any graphics files (EPS, TIFF, etc.) unless requested by Publications Management.
* Do not translate text that is part of a logo or proper names, addresses, telephone numbers, fax numbers, WAC codes, etc.
* Translations are required also in PDF format. They shall be Adobe Acrobat 5.0 compatible, and they should be formatted for web (Internet) presentation. For web presentation, no crop marks or printing marks should appear on the page in the PDF document. The page size and orientation of the PDF should be the same as the publication. All fonts that are in publication shall be embedded in the PDF.
* A few languages require submitting the translation in other formats, such as TIFF, and placing that translation in an InDesign document. These exceptions will be specified by Publications Management prior to translation. If the translation vendor determines that this technique is necessary, they shall notify Publications Management **PRIOR** to translation.
* DSHS publication numbers follow a specific format. Spacing is critical. The translation vendor(s) shall use the attached DSHS Common Language Data Codes as a reference for coding publications in different languages.

Format for DSHS Publication Numbers should appear as follows:

**For distribution through the Department of Printing–**

Publication number (X) language code (month/year)

Examples: DSHS 22-531(X) (5/00)

DSHS 22-531(X) CA (5/00)

**For distribution by individual programs-**

Publication number language code (month/year)

Examples: DSHS 22-604 (5/00)

DSHS 22-604 CA (5/00)

**For Department of Printing distribution, revised publication-Publication number (X) language code** (Rev. month/year)

Examples: DSHS 22-531(X) (Rev. 6/01)

DSHS 22-531(X) CA (Rev. 6/01)

**For distribution by individual programs, revised publication –**

Publication number language code (Rev. month/year)

Examples: DSHS 22-604 (Rev. 6/01)

DSHS 22-604 CA (Rev. 6/01)

* + **Note:** Clarification of digits to be used for indication of year: a four-digit year code is used for Forms and a two-digit year code is used for Publications.

Do not mix fonts of different foreign languages in the same document, unless requested. For example, **do not** mix Korean and Laotian in the same document.

Any exceptions to the above standards will be noted on the General Translation Services Request form (or its equal).

**3.1.3 Category 3**

Translation of written materials in this category will be for **ACES Supported Language Text** (see example, **Attachment H**).

Language requests for this category of work will be in the following languages – Cambodian, Chinese, Korean, Laotian, Russian, Somali, Spanish, and Vietnamese. **These languages are the “Principal Languages” for this category of work**.

**3.1.3.1 Category 3 Volume**

DSHS currently makes approximately 200 DSHS ACES supported language text block translation requests per year. One document that is requested to be translated into five (5) languages is considered to be five (5) translation requests.

**3.1.3.2 Category 3 Specific Requirements**

**The Contractor(s) shall comply with the following requirements for translation of DSHS ACES Text:**

* Font Specifications

|  |  |  |
| --- | --- | --- |
| **Language** | **Font Type** | **Font Size** |
| Cambodian | Aksarjhar | 14 Point |
| Chinese | Simsun | 12 Point |
| Korean | Batang | 12 Point |
| Laotian | Lao Helvetica | 16 Point |
| Vietnamese | VNI Times | 12 Point |
| Russian | Cyrillic II | 12 Point |
| Somali | Times New Roman | 12 Point |
| Spanish | Times New Roman | 12 Point |
| Any English Text (including numbers) | Times New Roman | 12 point |

* English text (e.g., number, dates, etc.) that is stricken (i.e., has a line through it) in the English version shall remain the same in the translated version of the text block. For example, spacing needed for a date may look like the following in the English version: ~~A00/00/00A~~. This is exactly how it should appear in the translated version as well.
* Translated text blocks shall be formatted with the following margin specifications:
* .25” Top
* .25” Bottom
* .25” Left
* 1.75” Right
* Some text blocks or parts of text blocks may be formatted as Microsoft Word Tables. These tables shall be preserved in the translated versions of the text blocks. Tables should not have any borders or shading.
* All proper nouns (i.e., program names) should be translated.
* If acronyms are used in the English version of the text block, the same acronyms shall be used in the translated version of the text block. For example, if the acronym TANF is used in the English text block it shall also be used in the translated text block (i.e., not translated as Temporary Assistance for Needy Families).
* Upon translation completion, all translated text shall be reviewed for translation accuracy, as well as for formatting accuracy (i.e., that all the specifications listed above have been adhered to).
* Each translated text block shall be returned as an individual MS Word file. The text block number shall not be included with the translated text (as it appears in the English file), however, the text block number shall be used as the electronic title of the file.
* Translations not done in accordance with the specific requirements listed above will be returned to the translation vendor to be redone at their own cost.

**3.1.4 Category 4**

Translation of written materials in this category will be for other **general information documents** provided by DSHS to limited English proficient (LEP) populations statewide (see example, **Attachment I**).

The majority of the language requests will be in the following languages – Cambodian, Chinese, Korean, Laotian, Russian, Somali, Spanish, and Vietnamese. **These languages are the “Principal Languages” for this category of work**.

**3.1.4.1 Category 4 Volume**

DSHS currently makes approximately 200 DSHS general information document translation requests per year. One document that is requested to be translated into five (5) languages is considered to be five (5) translation requests.

**3.1.4.2 Category 4 Specific Requirements**

In addition to the requirements listed herein, translation vendor(s) shall comply with the instructions provided with the translation request for general informational materials.

**3.1.5 Category 5**

Translation work in this category includes **client specific translation requests, generated by programs, local field offices and/or institutions** (see example, **Attachment J**). Translation requests will include, but are not limited to:

* client letters, notes and correspondence;
* client treatment reports;
* client specific fill-ins for previously translated numbered forms;
* regional/local field office informational materials; and
* fill-ins and full translations of letters generated at the local office through the Automated Client Eligibility System (ACES).

The majority of requests in this category are for Russian, Spanish and Vietnamese. The following are other languages (listed alphabetically) that are frequently requested:

|  |  |  |
| --- | --- | --- |
| Albanian | Ilocano | Romanian |
| Amharic | Japanese | Samoan |
| Arabic | Korean | Serbo-Croatian |
| Cambodian | Laotian | Somali |
| Chinese | Oromo | Tagalog |
| Farsi | Polish | Tigrigna |
| Hmong | Punjabi | Ukrainian |

**All 24 languages listed above are “Principal Languages” for this category of work.**

* **Note:** Work performed under this category of work does **not** include any full translation of DSHS numbered forms (whether or not they are requested as fill-ins) or publications.

**3.1.5.1. Category 5 Volume and Typical Translation Work Required by DSHS**

There are approximately 34,000 requests for translation in this category per year. Client specific translation requests will be faxed or e-mailed directly to the translation vendor.

The DSHS requesting office will fax or e-mail the material to be translated with a Translation Order Request form, DSHS 17-120 (**Attachment K**). DSHS will include, in all requests the following information:

* the requester’s name, office, address, telephone number and fax number;
* the date ordered and date due;
* the order number (assigned by the requesting office for the project being requested);
* the language requested;
* the type of translation (i.e., DSHS form number {e.g.,14-113}, ACES letter type {e.g. 006-01}, letter, report, legal document);
* the client identifier (i.e., client’s last name or client’s ID number), if applicable;
* the project priority (normal or rush); and
* the description and/or instructions for the project.
  + **Note:** Multiple orders may be placed on the Translation Order Request form.

The Bidder(s) awarded this category of work will be asked to perform both fill-in and full translations.

For fill-in translation requests, translation vendor(s) are required to translate information for inclusion in printed forms or letters. Fill-in information is additional text, written in English, which is placed onto previously translated DSHS forms or text added to computer generated, previously translated letters produced by field offices (i.e., ACES). The majority of fill-in translation requests are for 75 words or less. Translated fill-in information shall be type written. Exceptions to this requirement will be made on a case-by-case basis and must be authorized by the requesting office.

For full translation requests, translation vendor(s) are required to translate the entire document that is being requested. The majority of full translation requests are for client letters, client reports and legal documents. These documents are usually one page in length, consisting of 250 words or less. Requesters of full translations may request that translation vendor(s) retain completed work electronically for future fill-in purposes.

It is estimated that:

* 75% of client specific translation requests will be for fill-ins and
* 25% of client specific translation requests will be for full translations.

Once the translation order is completed, the translation vendor shall fax or e-mail the Translation Order Request form with the completed translation and the original document to the requester. The translation vendor shall return the completed translation and related documents the same way it was received, e.g., if it was received by fax, it shall be returned by fax. Translation vendor(s) are required to provide the following information with the completed project (as requested on the Translation Order Request form):

* the date the completed work is returned to DSHS;
* whether the work was a fill-in or full translation;
* the word count; and
* the charge for the completed order.

In some cases, translation vendor(s) may be required to mail a hard copy and/or an electronic copy (by disk or email) of the completed translation work to the requester.

Translation vendor(s) shall track all the information captured on the Translation Order Request form for all requests received by individual offices (requesters). Translation vendor(s) will be required to submit this information as backup documentation with all invoices requesting payment for Category 5 translation services rendered.

**3.1.5.2 Category 5 Specific Requirements**

In addition to meeting the requirements listed herein, translation vendor(s) shall:

* have the capacity to receive and transmit up to 100 fax and e-mail translation requests per day;
* have the capacity to provide the timely service required for this category;
* have the capacity to electronically track all information related to requests;
* write language name in English on the lower left hand corner of each page of the translated text; and
* submit the required Category 5 report on a quarterly basis.

Category 5 reports shall be in Microsoft Excel format and shall reference the report period and the translation vendor’s name at the top of the first page of the report. The report shall be sorted by DSHS Administration. Each quarter’s report is due, electronically, to designated DSHS program managers (to be identified at time of award), by the end of the month following the report period (e.g., reports for services provided April through June are due by the end of July). For purposes of accurate database management, translation vendor(s) shall use the Category 5 report template provided by DSHS, to manage and submit their reports. DSHS will provide the template at time of award.

The following information about eachtranslation project is required in the quarterly report:

* Project Order #;
* Requesting Administration;
* Requesting Division
* Requesting Office/Program;
* Document Description;
* Language;
* Fill-in or Full Translation Designation;
* Date Received from Requester;
* Date Due;
* Date Delivered;
* Translator’s Name
* Reviewer’s Name
* Word Count; and
* Cost.

**3.1.5.3 Category 5 Turnaround Timeframes**

All requests received by translation vendor(s) after 3:00 p.m. shall be considered as the next day’s business, excluding weekends and holidays. The time frames listed below are required for completing client specific translation requests and faxing or e-mailing the completed translation to the requester. In the event that a translation is needed earlier than the normal timeframe, DSHS shall pay a rush fee if the translation is completed within the needed timeframe.

* **Fill-In Translation Requests**

Translation requests are to be completed:

* Within one (1) business day for all **principal** languages identified in this category of work. No rush time frame available for fill-in translation requests.
* Within three (3) business days for all **non-principal** languages requested in this category of work. Turnaround time is two (2) business days for rush, fill-in translation requests.
* **Full Translation Requests**

Translation requests are to be completed:

* Within five (5) business days for all **principal** languages identified in this category of work. Turnaround time is two (2) business days for rush, full translation requests.
* Within seven (7) business days for all **non-principal** languages requested in this category of work. Turnaround time is three (3) business days for rush, full translation requests.

**3.1.5.4. Category 5 Billing Specifications**

In addition to the requirements outlined in the Invoicing section of the Special Terms and Conditions, each Category V invoice shall be accompanied by a log of all translation projects for each requesting office. This information will be verified by the requester prior to payment.

The log shall list the name of the requesting office, time period being reported and shall include the following for each project listed:

* requesting office’s order number indicated on the Translation Order Request form;
* date request was received by the translation vendor;
* date completed translation was returned to DSHS;
* project priority (Normal or Rush);
* type of translation (i.e., DSHS form number {e.g.,14-113}, ACES letter code {e.g. 006-01}, letter, report, legal document);
* client identifier (i.e., client’s last name or client’s ID number);
* language requested;
* translator’s name;
* reviewer’s name;
* word count;
* translation charge; and
* a sum total charge for all projects listed.

3.2. MODULE 2 – GENERAL USE

Bidders submitting proposals for consideration must meet the standards outlined below. Bidders that do not agree to meet these minimum requirements will not be considered eligible for contract award.

3.2.1. **Orders & Billing**

3.2.2.1 Orders will be from the individual state agencies and registered purchasing cooperative members.

3.2.2.3. Billing should be directed directly to the ordering agency to the address shown on any field orders and/or purchase orders. The state will not be responsible for any payments due from purchasing cooperative members.

3.2.2. **Turnaround Timeframes**

* Translation projects are to be completed in:
* Ten (10) business days, from the date of request for “normal” timeframe translation requests; and
* Five (5) business days or less, from the date of request for “rush” timeframe translation requests. Rush timeframes will be negotiated (one to five business days) at the time of request, taking into consideration the size of the document that needs to be translated, how quickly it is needed, and what languages are being requested.
* Translation projects that are not accepted by the first contractor offered the project will be offered to another authorized contractor (if available). If none of the contractors can complete the project in the required timeframes, the requester may go back to one of the contractors to negotiate a longer timeframe to complete the project.
* All requests received by translation vendor(s) after 12:00 PM (noon) shall be considered the next day’s business, excluding weekends and holidays.
  + **Note:** For all categories, timelines for translation services will begin on the day the request is received by the translation vendor and end on the day submitted. Mailing time to and from the requesting facility is not included.

3.2.3. **Specifications and Requirements**

When requested, the Contractor is to provide a hard copy and electronic files in PDF file format. The Contractor must also be able provide translations using *Pagemaker, Indesign* or *Microsoft Word*.

Contractor, when requested, is to prepare, process, format and revise translations using software compatible PC and *Macintosh* computer systems.

Computer generated translations using translation software will not be allowed.

3.2.3.1. Category 6, FORMS PAMPHLETS & BROCHURES

(Additional information will be provided via amendment.)

3.2.3.2. Category 7, LETTERS & NOTICES

(Additional information will be provided via amendment.)

3.2.3.3. Category 8, TECHNICAL DOCUMENTS

(Additional information will be provided via amendment.)

Translation of chemical terminology

* + Translation of technical chemical bulletins includes information addressing use of chemicals, potential hazards of chemicals, appropriate protective measures, labeling of containers, Material Safety Data Sheets and employee training programs
  + Translation of labels designed to ensure employees are appraised of all hazards to which they may be exposed, relevant symptoms, appropriate emergency treatment, proper conditions and precautions of safe use or exposure
  + Translation of (chemical) technical surveys.
  + Translate into the 5 most common foreign languages, Material Safety Data Sheets information to inform employees of their rights, and materials related to employer Chemical Hazard Safety Communication Programs. Note: The 5 most common languages are currently Cambodian, Chinese, Korean, Spanish and Vietnamese.

3.2.3.3. Category 9, LABELS & MISCELLANEOUS

(Additional information will be provided via amendment.)

* GRAPHIC DESIGN:

When requested, Contractor will be required to provide camera ready graphic design and hard copy utilizing laser printer or type setting. A cost estimate of any graphic design project will be presented to the ordering agency for approval prior to commencement of any additional work on the project.

Contractor may also be asked to include text, titles and labels on graphic which is to be included in any cost estimate.

An hourly rate is to be offered on the price sheets. Pricing for Graphic Design will not be part of the cost evaluation; however pricing must be consistent with bidder’s other pricing and within the same profit margins.

# EVALUATION / AWARD

## 4.1. ADDITIONAL COPIES OF PROPOSAL

One original and five (5) complete copies of the proposal shall be submitted to the Office of State Procurement by the opening date and time shown on the first page of this document. Late proposals will not be accepted for consideration. Proposals shall include one original, and five bound (in a three-ring binder) complete copies. Only hard copies will be accepted, CD, disks, fax or electronic copies will not be accepted.

## 4.2. Preliminary Review

The Contracts Specialist (CS) at Office of State Procurement will review each proposal for responsiveness to the RFP. Failure to provide all required documents will be grounds for find bid non-responsive.

## 4.3. SELECTION OF EVALUATORS

The Office of State Procurement (OSP) will select evaluators who are experienced in management and fiscal administration to independently evaluate each management proposal.

## 4.4. EVALUATION and AWARD

Cost and non-cost factors will be evaluated independently of each other. Award(s) will be made on a point allocation basis with 67% of the points assigned to cost factors and 33% of the points assigned to non-cast factors.

4.4.1. Management Proposal

Management Proposals will be evaluated based on:

* Written responses to the Management Questions;
* Work experience provided by the Bidder.

There are 300 points possible for the Management Proposal for each category. The management proposal score will be used for all categories of work bid. This total represents approximately 33% of the total possible Proposal score.

Bidders that do not receive an overall score of 65% or 195 of the total possible points possible on the written management questions section of the management proposal will be considered non-responsible and the proposal will not receive further consideration for award.

4.4.2. Cost Proposal

OSP will be responsible for evaluating each cost proposal. Cost Proposals will be evaluated based on prices proposed for services provided within each translation category. Bidders are to submit a price sheet for each category of work they are bidding. Bidders are not required to submit price sheets for all categories.

There are 600 points possible for the Cost Proposal for each category. This represents 67% of the total Proposal score.

4.4.3. Scoring

Evaluation teams will score each of the management proposals that pass the CS’s preliminary review. It is the responsibility of the Bidder to make the proposal as clear and complete as possible so the evaluators understand all aspects of the proposal. Bidders who pass the management evaluation will move onto the cost evaluation.

For evaluation purposes, cost factors shall be based on pricing specified by the bidder on the Price Sheets including any applicable prompt payment discount of 30 days or more as offered on the Proposal Information page. The lowest evaluated bid price for each section of each category shall be assigned points totaling 600 per category (see price sheet for assigned points). The lowest offered price for each section will receive the maximum point and the higher priced bids will receive a proportionally fewer number of points. For evaluation purposes each Bidder’s section will be added together for an evaluation total for each category.

The Bidder with the highest total score (i.e., combined management and cost score, 900 points possible) for each category will be awarded a contract.

The state reserves the right to award multiple contracts for each category of translation work in order to facilitate the needs of the contract users. Contract award(s) will be the decision of the Contract Specialist based on the total points received by each bidder for cost and non-cost factors. The state further reserves the right to aggregate award.

* + 1. Evaluation Points per Category

|  |  |
| --- | --- |
| DESCRIPTION | POINTS |
| MANAGEMENT QUESTIONS |  |
| * RECRUITMENT METHODS & PROCESSES | 50 |
| * EXPERTISE OF TRANSLATORS | 75 |
| * WORK EXPERIENCE | 45 |
| * TRANSLATION REVIEW PROCESS | 80 |
| * ORIENTATION | 20 |
| * COMPLAINT RESOLUTION PROCESSES | 30 |
| TOTAL | 300 |
| COST PROPOSAL | 600 |
| TOTAL | 900 |

## 4.5. EVALUATION CONFERENCE

To aid in the evaluation process, after bid opening, the state may require individual Bidders to appear at a date, time and place determined by the state for the purpose of conducting discussions to determine whether both parties have a full and complete understanding of the nature and scope of contractual requirements. In no manner shall such action be construed as negotiations or an indication of the state’s intention to award. Additionally, if it is determined during an Evaluation Conference that a bidder has misrepresented themselves in their responses to the Management Questions, the bidder will be considered non-responsive. The evaluators will fully document the misrepresentation.

# SPECIAL TERMS & CONDITIONS

## 5.1 ERRORS AND OMISSIONS INSURANCE

**In addition to the insurance requirements outlined in the Standard Terms and Conditions, please note the following:**

The state will not be responsible for any mistakes or omissions by any contractor under this agreement in performance of services provided under contract. Limitation of liability includes, but is not limited to, unintentional, negligent, willful or intentional mistakes or omissions by any contractor, employee of contractor, or sub-contractor. Further, the state will not be responsible for any acts of the contractor that occur during the course of the performance of this contract, but are not related to translation services. These acts include all criminal and civil acts that may give rise to liability.

**The contractor and subcontractor(s) shall at all times during the term of this contract, carry and maintain Errors and Omissions Liability insurance with minimum limits of $1,000,000 per incident, loss or person, as applicable. If defense costs are paid within limit of liability, Contractor shall maintain limits of $2,000,000 per incident, loss or person as applicable.**

## 5.2 RETENTION OF RECORDS

The contractor shall maintain, for at least three years after completion of this contract, all relevant records pertaining to this contract in readable files. This shall include, but not be limited to, all records pertaining to actual contract performance from the date of contract award. It shall also include information necessary to document the level of utilization of MWBE’s and other businesses as subcontractors and suppliers in this contract as well as any efforts the contractor makes to increase the participation of MWBE’s. The contractor shall also maintain, for at least three years after completion of this contract, a record of all quotes, bids, estimates, or proposals submitted to the Contractor by all businesses seeking to participate as subcontractors or suppliers in this contract. The State shall have the right to inspect and copy such records. If this contract involves federal funds, Contractor shall comply with all record keeping requirements set forth in any federal rules, regulations, or statutes included or referenced in the contract documents.

## 5.3 PRICING AND ADJUSTMENTS

Unless otherwise stipulated all bids shall include unit prices and extensions where applicable and be otherwise in the format requested.

All bid pricing is to include any shipping/mailing fees for any destination within the State of Washington.

### All pricing shall include the costs of bid preparation, servicing of accounts, and all contractual requirements. During contract period pricing shall remain firm and fixed for at least 365 calendar days after effective date of contract. Adjustments in pricing will be considered after firm fixed price period on a pass through basis only. A minimum of 60 calendar days advance written notice of price increase is required which is to be accompanied by sufficient documentation to justify the requested increase. Documentation shall be based on United States published indices such as the Producer Price Index. Acceptance will be at the discretion of the State Procurement Officer and shall not produce a higher profit margin than that established on the original contract pricing. Approved price adjustments shall remain unchanged for at least 365 calendar days thereafter.

## 5.4 Safeguard of Client Information/HIPPA

The major goal of the Privacy Rule of the Health Insurance Portability and Accountability Act of 1996 (HIPPA), is to assure that an individual’s health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public’s health and well being. Effective April 14, 2003, the Privacy Rule limits the ways in which Protected Health Information about individuals can be used or disclosed. Where use of disclosure is permitted, a written agreement that contains the required privacy language detailing the limits of the use or disclosure is required. Each agency will decide if there shall be a formal agreement between vendor and agency and will execute such agreement within thirty days of award of contract.

In addition to the Privacy Rule of HIPPA, Bidders are prohibited from permitting the disclosure of the contents of any records, files, papers, software, or other communications connected with the administration of its programs for purposes not connected with official business. Official business shall include purposes connected with the administration of DSHS and other agency programs.

# 5.5 AUDIT PRIVILEGES

The Contracts Specialist and one or more employees from DSHS or any other designated state representative(s) reserve the right to audit and examine the Contractor’s accounting and billing records directly or indirectly relating to this contract. With prior notification, the state shall have access to all buildings, records, and other information relating to this contract. The state’s representatives shall be given access to these records within a reasonable amount of time after notification.

**5.6 Invoicing**

Contractors shall submit an original invoice with the required supporting documentation as outlined in each translation category.

Invoices shall contain the following characteristics:

* + - the contract number;
    - a unique invoice number; and
    - be properly annotated with applicable prompt payment discounts.

Contractors will assume responsibility for costs related to correcting jobs translated or formatted incorrectly. Payment will not be made until erroneous billings are corrected. Payment shall not be made for the cost of translation if final product is determined by DSHS to have not been done or rectified in accordance with translation request specifications. If an error is found after an invoice has been issued, a credit memo will be submitted to correct the error.

**5.7 BILLING PROCEDURES (Department of Labor & Industries (LNI) only)**

LNI will pay the contractor within 30 calendar days of receipt of properly executed invoice vouchers. Requests for payment under this contract shall be submitted by the Contractor on State Invoice Vouchers (Form A-19). Invoices shall include such information as is necessary for LNI to determine the exact nature of all expenditures. Each voucher will clearly reference Contract Number 09505. Vouchers shall be submitted to LNI’s Contract Manager.

Invoices shall include at least the itemized information requested by LNI’s Contract Manager.

Payment shall be made after acceptance by the Contract Manager of each deliverable as describe in the original order. No payment in advance or in anticipation of services or supplies under this contract shall be made by LNI. Claims for payment submitted by the contractor to LNI for costs due and payable under this contract that were incurred prior to the expiration date shall be paid to the contractor is received by LNI within 90 days after the expiration date.

**5.8 Drug Free Workplace Act**

The successful contractor(s) shall provide a comprehensive drug-free workplace program which is to include the following:

* Publish policy statement, specifying standards of conduct and sanctions for violations. The policy statement shall establish the standards of conduct regarding the use, possession, and distribution of alcohol and other drugs, and/or impairment as the result of such conduct; sanctions for violations of the policy; and opportunities to obtain assistance for employees with drug/alcohol problems.
* Furnish a copy of the policy statement to each employee.
* Establish an employee awareness program, which includes but is not limited to, an explanation of the policy statement to all employees along with information on local drug/alcohol resources.
* Notify the appropriate federal agency when an employee is convicted for violation of a alcohol or mood-altering substances has produced a dependency harmful to the employee’s work performance.

**5.9. Overpayment and Assertion of Lien**

In the event that the state establishes overpayment or erroneous payments made to the contractor under this contract, the state shall secure repayment, plus interest, if any, through the filing of a lien against the contractor’s real property or by requiring the posting of a bond, assignment of deposit, or some other form of security acceptable to the state, or by doing both.

**5.10. State Ethics Law**

The State of Washington including all state agencies is prohibited by law from contracting with current DSHS employees and/or with former State employees under certain circumstances. If you or any of your employees, officers, directors or partners are current or former employees of the state, please read RCW 42.52 (1994 Ethics in Public Service) and/or consult with an attorney to determine your eligibility to bid or submit a proposal.

## 5.11 RIGHTS IN DATA

Data which originates from the Contract shall be “works for hire” as defined by the U.S. Copyright Act of 1976 and shall be owned by DSHS/contract user. Data shall include, but not be limited to, reports, documents, letters, publications, brochures, notices, forms, pamphlets, advertisements, surveys, studies, and/or computer programs and shall be made available to contract users in a useable electronic format as requested. Ownership includes the right to obtain and transfer this data at the discretion of contract user.

## 5.12 Office of State Procurement Report

**Sales and Subcontractor Report:** A quarterly Sales and Subcontractor Report shall be submitted in the format designated by the Office of State Procurement. Sales and Subcontractor Report is available online: <http://www.ga.wa.gov/PCA/forms/usage.doc> Total purchases for each State Agency, University, Community and Technical Colleges shall be shown separately. Total purchases for all political purchases or other purchasers shall be reported as an aggregate total.

The report shall include sales information (Section A) and amounts paid to each subcontractor during the reporting period (Section B)

Reports should be rounded to nearest dollar. Contractors will be provided with all necessary sample forms, instructions, and lists. Reports are due thirty (30) days after the end of the calendar quarter, i.e., April 30th, July 31st, October 31st and January 31st.

# CHECK LIST

This checklist is provided for bidder's convenience only and identifies the bid documents that are to be submitted with each package. **Any proposal packages received without these documents shall be deemed non-responsive and shall not be considered for award.**

|  |  |
| --- | --- |
| **Proposal Copies to be Returned:** |  |
| [Proposal submittal entitled: Offer and Award](#_OFFER_AND_AWARD_1), (Section 7.1) |  |
| Proposal  [submittal entitled: Proposal Information](#_SUPPLEMENTAL_INFORMATION) (Section 7.2) |  |
| Emergency Recovery Plan (Section 2.1) |  |
| Management Proposal – Responses to Management Questions (Section 7.3) |  |
| [Bid submittal entitled: Cost Proposal Sheets](#_PRICE_SHEETS) (Section 7.4) |  |
| [Additional Copies of Bid Submittal](#_ADDITIONAL_COPIES_OF_BID SUBMITTAL), 5 copies and 1 original (Section 4.1) |  |
|  |  |
| **After award the following documents are to be received within 15 days:** |  |
| Certificate of Insurance (**Attachment B – Sample Certificate**) |  |

## proposal Submittals

# 7.1 OFFER AND AWARD

Bidders are required to read and understand all information contained within this entire bid package. There are some standard documents, which are referred to in this bid package that are not automatically printed or sent out with this bid. For example, Competitive Procurement Standards (Standard Terms and Conditions, Instructions to Bidders, Definitions), Sales/Service & Subcontractor Report are binding terms of this contract. It is important that you read and understand these documents. These documents are available on our website at <http://www.ga.wa.gov/pca/cps.htm>.

**STANDARD DEFINITIONS *revised 06/02/03***

**STANDARD INSTRUCTIONS FOR BIDDERS *revised 06/02/03***

**STANDARD TERMS AND CONDITIONS *revised 3/09/06***

Bidder further offers to furnish materials, equipment or services in compliance with all terms, conditions, and specifications herein including all amendments. Submitting this document with an authorized signature constitutes complete understanding and compliance with the terms and conditions and certifies that all-necessary facilities or personnel are available and established at the time of bid submittal. By signing this document, the bidder confirms compliance with the Bidder Qualifications section of this RFP.

|  |  |  |
| --- | --- | --- |
| (Company Name) |  | (Typed or Printed Name) |
|  |  |  |
| (Address) |  | (Title) |
|  |  |  |
| (City) (State) (Zip) |  | (Phone No.) |
|  |  |  |
| (Federal Tax Identification Number) |  | (Bidder’s Signature) (Date) |
|  |  |  |
| Email |  |  |

CONTRACT AWARD

(For State of Washington Use Only)

A contract is hereby awarded between the above company and the State of Washington, Office of State Procurement, Purchasing and Contract Administration, to be effective , Year . This is a Partial/Total award for TRANSLATION SERVICES.

**Authorized Signatures**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| (RFP Coordinator) |  | (Date) |  | (Unit Manager) |  | (Date) |

## 

## 7.2 PROPOSAL INFORMATION

Bidder shall complete the following:

7.2.1. Prompt Payment Discount % \_\_\_\_\_ days. Note: Prompt payment discount periods equal to (or greater than) 30 calendar days will receive consideration and bid pricing will be reduced (for evaluation purposes only) by the amount of that discount(s).

7.2.2.Authorized Representative:

|  |  |  |  |
| --- | --- | --- | --- |
| Primary Contact-Contract Administration | | Alternate Contact - Contract Administration | |
| Name: |  | Name: |  |
| Telephone: |  | Telephone: |  |
| Fax: |  | Fax: |  |
| Email: |  | Email: |  |
| Customer Service/Order Placement | | | |
| Name: |  | Name: |  |
| Telephone: |  | Telephone: |  |
| Fax: |  | Fax: |  |
| Email: |  | Email: |  |

7.2.4. Addresses:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Orders to be sent to: | | Billing will be from: | | Payment to be sent to: |
|  |  |  |  |  | |
|  |  |  |  |  | |
|  |  |  |  |  | |

* + 1. Agree to Sell to Political Subdivisions:

Bidder agrees to sell the goods and services on this contract to political subdivisions which are members of the State of Washington Purchasing Cooperative (WSPC): Yes\_\_\_ No\_\_\_\_\_(If reply is “No” attach letter to this bid response explaining reason(s) for declining participation by political subdivisions).

* + 1. Agree to Sell to NonProfit Corporations:

Bidder agrees to sell the goods and services on this contract to self-certified nonprofit corporations which are members of the State of Washington Purchasing Cooperative (WSPC): Yes\_\_\_ No\_\_\_\_(If reply is “No” attach letter to this bid response explaining reason(s) for declining participation by nonprofit organizations)

* + 1. Federal Tax Identification Number:
    2. Firms bidding from California only: Is your firm currently certified as a small business under California Code, Title 2, Section 1896.12? Yes No .

# 7.3. MANAGEMENT PROPOSAL

|  |
| --- |
| **Management Questions**  **All Bidders must answer questions 1 through 6. Failure to respond to these required questions shall be the basis for rejection of the proposal.**  **300 POINTS MAXIMUM FOR EACH CATEGORY OF WORK** |

1. Describe your translator recruitment methods and processes. Please include information regarding your translator turnover rate and describe any policies and procedures your company employs to retain translators (e.g. incentives).

**50 Points Possible**

2. Describe the method your company uses to determine the expertise of translators you employ or contract with. Provide detailed information regarding the evaluation process used to determine translator expertise including, but not limited to, your translator test(s) along with the tool(s) and benchmarks to evaluate the test(s).

**75 Points Possible**

3. Work Experience. Please provide the following information for the last 5 completed translation projects that were requested by **non-DSHS** entities (at least 3 of the 5 requesters listed must not be the same). If bidder elects to submit more than five projects, the state will select those that are to be contacted and scored. If fewer than five are provided, the proposal will receive a deduction of 10 points for every reference that is not provided:

* Name of company requesting translation
* Name of translation project
* Project word count
* First and last name, telephone number, mailing address, email address and fax number of the person requesting this translation project for the Requester

The state will contact these requesters and ask them to respond to a set of standardized questions. Points will be awarded based on responses to the questions.

**45 Points Possible**

4. Describe your translation accuracy/quality review process.

**80 Points Possible**

5. Describe your ongoing (initial and refresher) translator orientation process, as it will pertain to contractual requirements listed in this RFP and possible future contract amendments.

**20 Points Possible**

6. Describe your complaint resolution process. In your response, please specifically address how your company would deal with complaints regarding poor translation quality, as well as late delivery of translation projects.

**30 Points Possible**

## 7.4. COST PROPOSAL/PROPOSAL SUBMITTAL

**7.4.1. MODULE 1, DSHS**

**Cost Proposal for Category \_\_\_\_\_\_ (Enter 1, 2, 3 or 4)**

**Note: A cost proposal must be provided for each category being bid.**

7.4.1.1. For translation requests of 75 words or less and requests for formatting only. (20% weight factor or 120 points)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Fixed minimum charge is: | $ |  | x 90% | $ |
|  |  |  |  |  |
| Fixed minimum rush charge is: | $ |  | x 10% | $ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Total: |  |  | $ |  |
|  |  |  |  |  |

7.4.1.2. For translation requests of 76 - 2000 words. (65% weight factor or 390 points)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Per word charge is: | $ |  | x 90% | $ |
|  |  |  |  |  |
| Per word rush charge is: | $ |  | x 10% | $ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Total: |  |  | $ |  |
|  |  |  |  |  |

7.4.1.3. For translation requests of 2001 words or more. (15% weight factor or 90 points)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Per word charge is: | $ |  | x 90% | $ |
|  |  |  |  |  |
| Per word rush charge is: | $ |  | x 10% | $ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Total: |  |  | $ |  |
|  |  |  |  |  |

* + - 1. For re-keying any size document. (Pricing for re-keying will not be part of the cost evaluation. However pricing must be consistent with bidder’s other pricing and within the same profit margins.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Per word charge is: | $ |  | x 90% | $ |
|  |  |  |  |  |
| Per word rush charge is: | $ |  | x 10% | $ |

**Note: The “per word” charge will be paid for each word starting with the first word.**

PROPOSAL SUBMITTAL/**MODULE 1 (CONTINUED)**

**Category 5 Cost Proposal**

For fill-ins (75% weight factor or 450 points)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Fill-ins of 75 words or less, fixed minimum charge is: | $ |  | x 85% | $ |
|  |  |  |  |  |
| Fixed minimum rush charge is: | $ |  | x 15% | $ |
|  |  |  |
| Sub-total: | $ |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Fill-ins of 76 words or more, per word charge is: | $ |  | x 85% | $ |
|  |  |  |  |  |
| Per word rush charge is: | $ |  | x 15% | $ |
|  |  |  |
| Sub-total: | $ |  |
|  |  |  |
| Average~~-~~Total Charge | $ |  |
|  |  |  |

Full Translations (25 % weight factor or 150 points)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Fill-ins of 250 words or less, fixed minimum charge is: | | $ |  | x 85% | $ |
|  | |  |  |  |  |
| Fixed minimum rush charge is: | | $ |  | x 15% | $ |
|  |  |  |
| Sub-total: | $ |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Fill-ins of 251 words or more, per word charge is: | | $ |  | x 85% | $ |
|  | |  |  |  |  |
| Per word rush charge is: | | $ |  | x 15% | $ |
|  |  |  |
| Sub-total: | $ |  |
|  |  |  |
| Average Total Charge | $ |  |
|  |  |  |

**Note: The “per word” charge will be paid for each word starting with the first word.**

**7.4.2 MODULE 2 OTHER AGENCIES**

**Cost Proposal for Category \_\_\_\_\_\_\_(Enter 6, 7, 8 or 9)**

7.4.2.1. For translations of 75 words or less (35% weight factor or 210 points)

|  |  |  |  |
| --- | --- | --- | --- |
| Fixed Minimum per word charge is for Translation: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 55%= | $\_\_\_\_\_\_\_\_\_\_\_ |
| Fixed Minimum charge for Formatting: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 15% = | $\_\_\_\_\_\_\_\_\_\_\_ |
| Fixed Minimum charge for Reviewing: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 20% = | $\_\_\_\_\_\_\_\_\_\_\_ |
| Fixed Minimum charge added for a Rush: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 10% = | $\_\_\_\_\_\_\_\_\_\_\_ |
|  | Sub-total: |  | $\_\_\_\_\_\_\_\_\_\_\_ |

7.4.2.2. For translations of 76 words to 2000 (25% weight factor or 150 points)

|  |  |  |  |
| --- | --- | --- | --- |
| Fixed Minimum per word charge is for Translation: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 55% = | $\_\_\_\_\_\_\_\_\_\_\_ |
| Fixed Minimum charge for Formatting: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 15% = | $\_\_\_\_\_\_\_\_\_\_\_ |
| Fixed Minimum charge for Reviewing: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 20% = | $\_\_\_\_\_\_\_\_\_\_\_ |
| Fixed Minimum charge for a Rush: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 10% = | $\_\_\_\_\_\_\_\_\_\_\_ |
|  | Sub-total: |  | $\_\_\_\_\_\_\_\_\_\_\_ |

7.4.2.2. For translations of 2001 (30% weight factor or 180 points)

|  |  |  |  |
| --- | --- | --- | --- |
| Fixed Minimum per word charge is for Translation: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 55% = | $\_\_\_\_\_\_\_\_\_\_\_ |
| Fixed Minimum charge for Formatting: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 15% = | $\_\_\_\_\_\_\_\_\_\_\_ |
| Fixed Minimum charge for Reviewing: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 20% = | $\_\_\_\_\_\_\_\_\_\_\_ |
| Fixed Minimum charge for a Rush: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 10% = | $\_\_\_\_\_\_\_\_\_\_\_ |
|  | Sub-total: |  | $\_\_\_\_\_\_\_\_\_\_\_ |

7.4.2.3 Rate per page for laser printing and type setting (10% weight factor or 60 points):

|  |  |  |  |
| --- | --- | --- | --- |
| Fixed Minimum charge for Laser Printing: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 50% = | $\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Fixed Minimum charge for Type Setting: | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | X 50% = | $\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Sub-total : |  | $\_\_\_\_\_\_\_\_\_\_\_\_\_ |

7.4.2.4. Rate per hour for Graphic Design (Pricing for Graphic Design will not be part of the cost evaluation. However pricing must be consistent with bidder’s other pricing and within the same profit margins.)

|  |  |
| --- | --- |
| Fixed Minimum hourly rate for Graphic Design | $\_\_\_\_\_\_\_\_\_\_\_\_\_ |

A cost estimate of any graphic design projects will be presented to the ordering agency for approval prior to commencement of any additional work on the project.

## ATTACHMENTS

ATTACHMENT A, Code of Professional Conduct

ATTACHMENT B, Sample Certificate of Insurance Document

ATTACHMENT C, DSHS Written Language Codes

ATTACHMENT D, DSHS Procedures for Correcting Translations

ATTACHMENT E, General Translation Service Request Form (DSHS)

ATTACHMENT F, Example of DSHS Form

ATTACHMENT G, Example of DSHS Publication

ATTACHMENT H, Example of ACES Text

ATTACHMENT I, Example of Other Informational Forms (DSHS)

ATTACHMENT J, Example of Client Specific/Locally Generated DSHS Document

ATTACHMENT K, Translation Order Request Form for Category V Requests

ATTACHMENT L, Translation Review Guidelines

## ATTACHMENT A - Language Interpreter and Translator

## Code of Professional Conduct

1. Accuracy

Interpreters/translators shall always thoroughly and faithfully render the source language message, omitting or adding nothing, giving consideration to linguistic variations in both source and target languages, conserving the tone and spirit of the source language message.

2. Cultural Sensitivity -- Courtesy

Interpreters/translators shall be culturally competent, sensitive, and respectful of the individual(s) they serve.

3. Confidentiality

Interpreters/translators shall not divulge any information obtained through their assignments, including but not limited to information gained through access to documents or other written materials.

4. Disclosure

Interpreters/translators shall not publicly discuss, report, or offer an opinion concerning matters in which they are or have been engaged, even when that information is not privileged by law to be confidential.

5. Proficiency

Interpreters/translators shall meet the minimum proficiency standard set by DSHS by passing the required certification examination or screening evaluation.

6. Compensation

The fee schedule agreed to between the contracted language services providers and the department shall be the maximum compensation accepted. Interpreters/translators shall not accept additional money, considerations, or favors for services reimbursed by the department. Interpreters/translators shall not use for private or others gain or advantage, the department's time or facilities, equipment or supplies, nor shall they use or attempt to use their position to secure privileges or exemptions.

7. Non-discrimination

Interpreters/translators shall always be neutral, impartial and unbiased. Interpreters/translators shall not discriminate on the basis of gender, disability, race, color, national origin, age, socio-economic or educational status, or religious, political, or sexual orientation. If interpreters/translators are unable to ethically perform in a given situation the interpreters/translators shall refuse or withdraw from the assignment without threat or retaliation.

8. Self-evaluation

Interpreters/translators shall accurately and completely represent their certifications, training, and experience.

Attachment A Code of Professional Conduct (continued)

9. Impartiality -- Conflict of Interest

Interpreters/translators shall disclose any real or perceived conflict of interest which would affect their objectivity in the delivery of service. Providing interpreting or translation services for family members or friends may violate the individual's right to confidentiality, or constitute a conflict of interest.

10. Professional Demeanor

Interpreters/translators shall be punctual, prepared, and dressed in a manner appropriate and not distracting for the situation.

11. Scope of Practice

Interpreters/translators shall not counsel, refer, give advice, or express personal opinions, to individuals for whom they are interpreting/translating, or engage in any other activities which may be construed to constitute a service other than interpreting/translating. Interpreters/translators are prohibited from having unsupervised access to clients, including but not limited to phoning clients directly.

12. Reporting Obstacles to Practice

Interpreters/translators shall assess at all times their ability to interpret/translate. Should interpreters/translators have any reservations about their competency, they shall immediately notify the parties and offer to withdraw without threat of retaliation. Interpreters/translators shall remain until more appropriate interpreters/translators can be secured.

13. Ethical Violations

Interpreters/translators shall immediately withdraw from encounters they perceive as violations of this Code. Any violation of the Code of Professional Conduct shall cause termination of the contract.

14. Professional Development

Interpreters/translators shall develop their skills and knowledge through professional training, continuing education, and interaction with colleagues, and specialists in related fields.

THIS CODE APPLIES TO ALL PERSONS PROVIDING LANGUAGE INTERPRETING OR TRANSLATION SERVICES AND SHALL BE COMPLIED WITH AT ALL TIMES

.

## ATTACHMENT B - Sample Certificate of Insurance Document

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***Certificate of Insurance*** Issue Date | | | | | | | |
| **Issued by:** | | | | **This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policies below.** | | | |
|  | | | | **COMPANIES AFFORDING COVERAGE** | | | |
|  | | | | Company Letter **A** | | | |
| **Insured:** | | | | Company Letter **B** | | | |
|  | | | | Company Letter **C** | | | |
|  | | | | **D** | | | |
|  | | | | **E** | | | |
| **COVERAGES**  **This is to certify that policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of such policies.** | | | | | | | |
| **CO #** | **TYPE OF INSURANCE** | **POLICY**  **NUMBER** | **POLICY**  **EFFECTIVE**  **DATE** | | | **POLICY**  **EXPIR.**  **DATE** | **ALL LIMITS IN THOUSANDS** |
|  | **GENERAL LIABILITY:**  \_\_\_ COMMER. GEN. LIABILITY  \_\_\_ COMBINED SINGLE LIMIT  \_\_\_ CLAIMS MADE \_\_\_OCCUR.  \_\_\_ OWNERS & CONT.'S PROT. |  |  | | |  | GENERAL AGGREGATE $  PRODUCTS-COMP/OPS AGGREGATE $  PERSONAL & ADVERTISING INJURY $  EACH OCCURRENCE $  FIRE DAMAGE (ANY ONE FIRE) $  MEDICAL EXPENSE (ANY ONE PERSON) $ |
|  | **AUTOMOBILE LIABILITY:**  \_\_\_ ANY AUTO  \_\_\_ ALL OWNED AUTOS  \_\_\_ SCHEDULED AUTOS  \_\_\_ HIRED AUTOS  \_\_\_ NON-OWNED AUTOS |  |  | | |  | COMBINED SINGLE LIMIT $  BODILY INJURY (PER PERSON) $  BODILY INJURY (PER ACCIDENT) $  PROPERTY DAMAGE $ |
|  | **EXCESS LIABILITY:**  \_\_\_ OTHER THAN UMBR. FORM |  |  | | |  | EACH OCCURRENCE AGGREGATE  $ $ |
|  | \_\_\_ WORKER'S COMPENSATION  AND EMPLOYERS' LIABILITY |  |  | | |  |  |
|  | **OTHER:** |  |  | | |  |  |
| **DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS:**  As respects State of Washington Contract No: \_\_\_\_\_\_\_\_\_\_  The State of Washington and all authorized users of Contract No. \_\_\_\_\_\_\_ are added as additional insured, but only as respects the negligence of \_\_\_\_\_\_(contractor)\_\_\_\_\_\_\_\_ and its employees. | | | | | | | |
| CERTIFICATE HOLDER  State of Washington  Department of General Administration  Office of State Procurement  Post Office Box 41017  Olympia, Washington 98504-1017 | | | | | **Cancellation:**  **Should any of the above described policies be canceled before the expiration date thereof, the issuing company will endeavor to mail 45 days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives**. | | |
|  | | | | | **AUTHORIZED REPRESENTATIVE**: | | |

## ATTACHMENT C - DSHS Written Language Codes

**Language Code Language Code Language Code**

Albanian AL

Amharic AM

Anuak AN

Arabic AR

Armenian AE

Assyrian AS

Bengali BN

Bikol BK

Bosnian SC

Braille (English) BR

Bulgarian BL

Burmese BS

Cambodian CA

Cantonese (Chinese) CH

Cebuano CB

Cham CM

Chamorro CR

Chinese CH

Chiu Chow (Chinese) CH

Creole CE

Czech CZ

Danish DN

Dari FA

Dinka AR

Dutch DU

English EN

Estonian ES

Farsi FA

Fijian FJ

Finnish FI

French FR

French-Creole FC

Georgian GN

German GE

Greek GR

Gujarati GJ

Haitian-Creole HC

Hakka (Chinese) CH

Hebrew HE

Hindi HI

Hmong HM

Hungarian HU

Ibo (Igbo, Egbo) IB

Ilocano IL

Ilongo IO

Indonesian IN

Iranian FA

Italian IT

Iwaidja LI

Japanese JA

Kenya (Kenyah) KE

Kikuyu KY

Kmhmu KM

Korean KO

Kurdish AR

Laotian LA

Large Print English LP

Latvian LV

Lebanese AR

Limba (Malimba) LI

Lithuanian LT

Macedonian MC

Malayalam MM

Malay (Malaysian) ML

Mandarin (Chinese) CH

Marathi MR

Marshallese MS

Mien LA

Moroccan AR

Norwegian NO

Nuer AR

Oromo OM

Pashtu (Pushtu, Pashto) PA

Persian FA

Pohnpeian PH

Polish PO

Portuguese PG

Punjabi PJ

Puyallup PU

Quechua QU

Romanian RO

Russian RU

Rwanda RW

Salish SH

Samoan SA

Serbo-Croatian SC

Shona SN

Sinhalese (Sinhala) SE

Slovak SV

Somali SM

Spanish SP

Sudanese AR

Swahili SI

Swedish SW

Syrian AR

Tagalog TA

Tamil TM

Telegu (Telugu) TE

Thai TH

Tibetan TB

Tigrigna TI

Toishanese (Chinese) CH

Tongan TN

Trukese (Chuukese) TR

Turkish TK

Ukrainian UK

Urdu UR

Vietnamese VI

Visayan VS

Wanda WA

Yakama YA

Yoruba YR

Yugoslav SC

Yupik (Yupic) YP

Zulu ZU

## ATTACHMENT D – Translation Correction Procedures

**DSHS Procedures for Correcting Translations**

*(to be followed by all translators of all languages)*

Upon receiving reviewer’s suggestions and comments, the translator will:

1. Check everything marked by the reviewer against original translation to determine the most accurate translation of words/phrases/sentences.

2. On the version with the reviewer’s markings,

**a) write “OK”** by the word/phrase/sentence suggested by the reviewer that **is adopted** by the translator;

**b) write “1”** by the word/phrase/sentence suggested by the reviewer that **is not adopted** by the translator to indicate the original translation is good as is and will not cause any misunderstanding (refer to “Notes” in Translation Review Guidelines);

**c) write “2”** by the word/phrase/sentence suggested by the reviewer that **is not adopted** by the translator to indicate the suggested change is the reviewer’s regionalism or personal preference (refer to “Notes” in Translation Review Guidelines).

3. Revise/change translation based on what is determined to be the most accurate translation (see 1 and 2 above).

4. Return revised final hard copies, electronic files, and reviewer’s version with translator’s markings to the Translation Service Coordinator.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| DSHSlogoPC | | | | | | GENERAL TRANSLATION SERVICES REQUEST Field Office  State Office | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **A. REQUESTOR SECTION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. DOCUMENT TITLE/DESCRIPTION | | | | | | | | | | | | | New  Revised  Artwork  changed (AC) | | | | | | 2. DSHS NUMBER, REVISION, AND AC DATE  DSHS number:  Revision date:  AC date: | | | | | | | | | | | | 3. DATE | |
| 4. TRANSLATION REQUESTED BY: NAME | | | | | | | | | | | | | TELEPHONE NUMBER (AND AREA CODE) | | | | | | | | | | | | | FAX NUMBER (AND AREA CODE) | | | | | | |
| 5. ADMINISTRATION/DIVISION | | | | | | | | | | | | | OFFICE | | | | | | | | | | | | | | | | | | MAIL STOP | |
| 6. SOURCE LANGUAGE  English  Other (specify): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. TARGETED LANGUAGE(S) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Albanian  Amharic  Arabic  Armenian  Bulgarian  Cambodian | | | | Chinese  Farsi  French  German  Hindi  Hmong | | | | Hungarian  Ilocano  Indonesian  Japanese  Korean | | | | Kurdish  Laotian  Mien  Navajo  Polish | | | | | | Romanian  Russian  Samoan  Serbo-Croatian  Somali | | | | | Spanish  Tagalog  Thai  Tibetan  Tigrigna | | | | | | | Tongan  Turkish  Ukrainian  Vietnamese  Zulu | | |
| Other: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B. FOR TRANSLATION COORDINATOR USE ONLY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. TRANSLATION CONTACT NAME | | | | | | | | | | | | | | | 2. TRANSLATION TYPE  Publication  Form  ACES  Other (specify): | | | | | | | | | | | | | 3. DATE TO CONTRACTOR    4. DUE DATE | | | | |
| TELEPHONE NUMBER | | | | | | | | | | | | | | |
| 5. CONTRACTOR  WLT  CTS  DLC | | | | | | | | | 6. PROJECT NUMBER | | | | | | 7.  RUSH (see Item 13 below)  Documentation attached | | | | | | | | | | | | | 8. WORD COUNT | | | | |
| 9. SOFTWARE USED | | | | | | | | | 10. HIGHLIGHTED COPY WITH REVISIONS ATTACHED  Yes  No | | | | | | | | | | | | | 11. ELECTRONIC TEMPLATE INCLUDED  Yes  No | | | | | | | | | | |
| 12. FINAL TRANSLATED FORMAT REQUIRED FROM CONTRACTOR  a.  PDF Electronic File  Paper Final: () copies  Other (specify):  b.  Electronic File for Spanish:  INDICATE SOFTWARE REQUESTED IF OTHER THAN PDF  c.  Follow contract specified DSHS Technical Standards for Foreign Language Publications  d.  Translations must retain exact original format of the English form or publication  e.  Translations and English both appear on same page | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13. PRIORITY PROJECTS MUST BE JUSTIFIED. ATTACH JUSTIFICATION.  Legislative mandate  Fiscal impact  Legal requirement  Hearing date  Other (specify): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14. ACCOUNT CODE AND BILLING INFORMATION (MUST BE PROVIDED BEFORE TRANSLATION WILL BEGIN) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| REF  DOC | TRANS | M  O | FUND | | MASTER INDEX | | | | | **SUB** | **SUB**  **SUB** | | | ORG | | WORK CLASS | | | | COUNTY | CITY/ TOWN | | | | PROJ | | SUB | | PROJ | | | AMOUNT |
| SUF | CODE | D |  | | APPN INDEX | | PROG INDEX | | | **OBJ** | **OBJ** | | | INDEX | | ALLOC | | | | BUDG  UNIT | MOS | | | |  | | PROJ | | PHAS | | |  |
|  |  |  |  | |  | |  | | |  |  | | |  | |  | | | |  |  | | | |  | |  | |  | | |  |
| 15. BILL TO: NAME | | | | | | | | | | | | | | | | | | | | | | | | | TELEPHONE NUMBER (AND AREA CODE) | | | | | | | |
| MAILING ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16. INSTRUCTIONS TO CONTRACTOR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| C. LEP COORDINATOR OR DESIGNEE USE ONLY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Simultaneous release with the English issuance is standard. If this is not possible attach justification. LEP Coordinator or designee approval is required for exceptions. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LEP COORDINATOR/DESIGNEE’S SIGNATURE | | | | | | | | | | | | | | | | | DATE | | | | | | | CLUSTER | | | | | | | | |

## ATTACHMENT E- General Translation Service Request Form

**DSHS 17-099 (REV. 08/2002) (AC 04/2006**

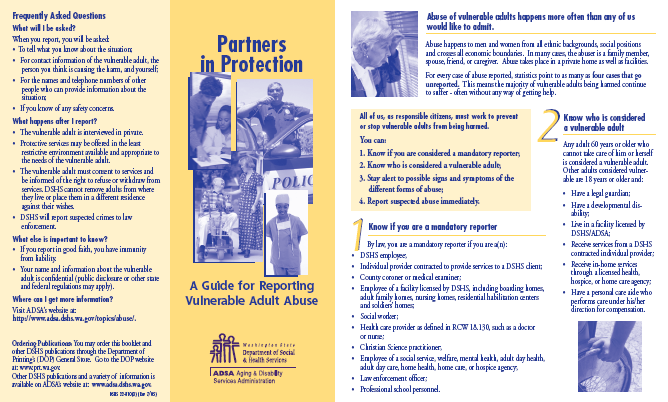
## ATTACHMENT F – Example of DSHS Form

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| logo | | **STATEMENT FROM LANDLORD/MANAGER** | | | LOCAL OFFICE    ACES CLIENT IDENTIFICATION NUMBER | | | TELEPHONE NUMBER    DATE | |
| **PROPERTY OWNER OR AUTHORIZED MANAGER: Complete all sections below with only the information you know to be true. Write “unknown” to questions you cannot answer. (Do not leave any box blank.)** | | | | | The Department of Social and Health Services is in the process of determining this client’s eligibility. Please provide the information requested below.  FINANCIAL SERVICES SPECIALIST’S SIGNATURE | | | | |
| **A. Rental or leased unit and tenant information:** | | | | | | | | | |
| 1. STREET ADDRESS APARTMENT (APT) NUMBER | | | | | Attach more pages if needed. | | | | |
| CITY STATE ZIP CODE | | | | |
| 2. TENANT’S NAME | | | | |
| 3. DATE MOVED IN | 4. TYPE OF RESIDENCE | | | |
| **B. Rent information:** | | | | | | | | | |
| 6. NAME OF PERSON(S) PAYING THE RENT | | | | | 7. CURRENT RENT AMOUNT  $ | 8. DATE THIS AMOUNT STARTED  $ | | | 9. DO THEY PAY BY CHECK?  Yes  No |
| 10. ANSWER THESE QUESTIONS BY CHECKING:  YES NO  Does the tenant pay only a portion of the rent?   How much: $  Is this subsidized housing?   What agency:How much: $  Is someone else paying part or all of the rent?   What agency:How much: $  Does the tenant work for a portion of the rent?   How much: $ | | | | | | | | | |
| **C. Utilities information: Mark the box(es) that apply.** | | | | | | | | | |
| 11. The main source of heating for this residence is:  Electric  Wood  Gas  Propane  Other (specify):  YES NO  12. Is there a separate meter for gas and electric?  13. does the tenant pay for air conditioning? | | | | | 14. Are all utilities included in the rent?  Yes  No  If NO, mark the box(es) the tenant pays for:  Electric  Water/sewer  Gas  Telephone  Propane  Garbage  Wood  Other (specify): | | | | |
|  | | | | | | | | | |
| 15. LANDLORD/MANAGER’S NAME | | | | | **16. Property Owner’s Name**  **(If different from Landlord/Manager)** | | | | |
| STREET ADDRESS OR PO BOX NUMBER | | | | | OWNER’S NAME | | | | |
| CITY STATE ZIP CODE | | | | | STREET ADDRESS OR PO BOX NUMBER | | | | |
| WORK TELEPHONE NUMBER | | | HOME TELEPHONE NUMBER | | CITY STATE ZIP CODE | | | | |
| LANDLORD/MANAGER SIGNATURE | | | | DATE | WORK TELEPHONE NUMBER | | HOME TELEPHONE NUMBER | | |

**DSHS 14-224 (X) (REV. 05/2005) TRANSLATED**

## ATTACHMENT G – Example of DSHS Publication





## ATTACHMENT H –Example of ACES Text

**Text Block 2505006**

You are participating in ~~WorkFirst~~. Your cash benefits will continue as long as you keep participating and meet all other eligibility requirements. If you stop participating, your grant will be replaced with a ~~Child Safety Net Payment~~. ~~Child Safety Net Payments~~ go to a protective payee to pay for basic expenses for your children only. With a ~~Child Safety Net Payment~~, you do not receive any cash for your own expenses.

**Text Block 2505007**

Although you are not participating in ~~WorkFirst~~, you have vulnerable children in your home. Your cash benefits are being replaced with a ~~Child Safety Net Payment~~ for your children. ~~Child Safety Net Payments~~ go to a protective payee to pay for basic expenses for your children only. You will not receive any cash for your own expenses. If you decide to start participating, you may get more benefits. Let me know if you want help getting a job, or if you think you are participating with ~~WorkFirst~~ requirements.

**Text Block 2505005**

You are exempt from mandatory ~~WorkFirst~~ work requirements. You are exempt because you are:

A needy caretaker relative age ~~55~~ or older, or

Applying for ~~SSI~~ with the help of a ~~DSHS~~ facilitator, or

A disabled adult, or

Caring for a disabled child or child with special needs or caring for a disabled adult, or

A non-Indian adult caring for Indian children in Indian country.

Even though you are exempt and not required to participate, you can choose to work. Let me know if you want help getting or keeping a job.

## ATTACHMENT I – Example of Other Informational Material

Dear Mr./MS:

Recent legislative changes to the State Supplemental Payment (SSP) program require that the Department of Social and Health Services (DSHS) expand the group of Supplemental Security Income (SSI) recipients who receive a SSP.

Because you get SSI and meet the SSP requirements, you are eligible to get an SSP payment. In November 2003, you will get one check for October, November, and December in the amount of ***$1,174***. Beginning ***January*** 2004, you will get an SSP check every month. The payment amount will be much less than the payment you receive in November. We will notify you of the amount of future payments in a separate letter.

Because the November check is so big, it could affect your eligibility for SSI in December by making you exceed the SSI resource limit. Exceeding the SSI resource limit could happen if you either do not spend the money you receive in November before the end of that month, or you buy things with the money that SSI counts towards the resource limit.

**What is a resource?**

A resource is money or things that you own that can easily be sold to make money. Some examples of resources are: cash, money in bank accounts, property, stocks, and bonds.

**Why are resources important in the SSI program?**

To get SSI your *countable resources* must be $2,000 or less for an individual or $3,000 or less for a couple. This is the SSI resource limit. Countable resources are the things you own that count toward the resource limit. Many things you own do not count toward the resource limit.

Some examples of resources that do not count toward the resource limit are: the house you live in, your car if it is used for certain daily activities or if it is equipped for use by a handicapped person, life insurance policies with a face value of $1,500 or less per person, burial plots for you or your immediate family, burial funds up to $1,500 for you and your spouse, and property you or your spouse use in a business or job.

**What happens to my SSI benefits if I give away a resource?**

Giving away cash to another person or selling a resource is called a “transfer” of resources. If you, your spouse, or a co-owner transfer a resource (including cash) or sell it for less than its worth, you may be ineligible for SSI benefits for as long as 36 months.

**How does transferring a resource affect Medicaid coverage?**

Medicaid may not pay for certain health care costs if you or your spouse give away a resource or sell it for less than its worth.

What if I need more information about the affect of my SSP on my SSI eligibility?

If you have questions about the affect of your State Supplemental Payment on your SSI eligibility, please contact your local Social Security office or call the Social Security Administration at 1-800-772-1213.

## ATTACHMENT J – *Example of Client Specific/Locally Generated Document*

|  |  |  |
| --- | --- | --- |
| KING NORTH/BALLARD P.O.BOX 34356 SEATTLE WA 98124 | DSHSlogoNew | |
| Phone # 206-341-7424 | |
| TTY/TDD # 206-706-4254 | |
| Toll Free # | |

08/29/05

|  |  |
| --- | --- |
|  | John Doe 123 Main St. Olympia, WA 98504 |

Dear Mr. Doe:

Your benefits from the following program will end on 09/30/05: ( X ) Cash ( ) Food   
( X ) Medical ( ) Long Term Care

The reasons for this decision are:

The person listed as the head of household for your food assistance cannot get food assistance.

See WAC rule (Washington Administrative Code): 388-408-0035, 388-468-0005

We do not consider you a resident of Washington.

See WAC rule (Washington Administrative Code): 388-400-0005, 388-454-0015, 388-462-0015, 388-468-0005, 388-503-0505, 388-505-0110, 388-505-0210, 388-505-0220

You can check these rules online at http://slc.leg.wa.gov/wacbytitle.htm or view them at your public library reference desk. If you can't find this information, please call our office.

If you disagree with any of our decisions, you may ask to have your case reviewed. You can also ask for a fair hearing. Your fair hearing rights are included in this letter.

You can get automated information about your case by calling The Answer Phone at 1-877-980-9220. When you call, you will need to enter your client ID number, which can be found in the bottom right hand corner of this letter.

If you plan to get private medical insurance, your new insurance might need proof of your prior DSHS medical benefits. We can give you a certificate of coverage so your new insurance may cover pre-existing conditions. To request a certificate, you may call the MAA toll-free number 1-800-562-3022.

Please call me if you have any questions about this letter.

Jane Doe  
360-555-1234

|  |  |
| --- | --- |
| 0006-01 Termination For AU | Client ID# 0000000 |

## ATTACHMENT K – *Translation Order Request Form for Category V Requests*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | **TRANSLATION ORDER REQUEST** | | | | | | | DATE ORDERED | | | | | DATE NEEDED BY | | | |
| **TO:** | | | | | | | REQUESTOR’S NAME  **FROM:** | | | | | | | | | | |
| DIVISION | | | | | | | | | | |
| OFFICE NAME | | | | | | | | MAIL STOP | | |
| TELEPHONE NUMBER (INCLUDE AREA CODE) | | | | | | | | | | |
| ADDRESS | | | | | | | | | | |
| FAX NUMBER | | | | | | | | ORG INDEX CODE | | |
| ORDER | TYPE | |  |  | CLIENT | | **FOR CONTRACTOR USE ONLY** | | | | | | | | | | |
| NUMBER | (E.G., 14-001, V01G) | | **RUSH** | **ACES** | IDENTIFIER | | FILL-IN, FULL | TRANSLATOR CODE | | WORD  COUNT | | | COST | | | | DATE RETURNED |
|  |  | |  |  |  | | Fill-in  Full |  | |  | | |  | | | |  |
| LANGUAGE(S) | | | | | | | | | | | | | | | | | |
|  |  | |  |  |  | | Fill-in  Full |  | |  | | |  | | | |  |
| LANGUAGE(S) | | | | | | | | | | | | | | | | | |
|  |  | |  |  |  | | Fill-in  Full |  | |  | | |  | | | |  |
| LANGUAGE(S) | | | | | | | | | | | | | | | | | |
|  |  | |  |  |  | | Fill-in  Full |  | |  | | |  | | | |  |
| LANGUAGE(S) | | | | | | | | | | | | | | | | | |
|  |  | |  |  |  | | Fill-in  Full |  | |  | | |  | | | |  |
| LANGUAGE(S) | | | | | | | | | | | | | | | | | |
| SPECIAL REQUIREMENTS | | | | | | | | | | | | | | | | | |
| **PLEASE NOTE:** There will be an extra fee for **RUSH** service. TURNAROUND | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | TIME FRAMES (WORKING DAYS) | | | | | |
| **FILL-IN TRANSLATIONS:** | | | | | | | | | | | | NORMAL | | | | RUSH | |
| Cambodian, Chinese, Korean, Laotian, Russian, Spanish, and Vietnamese | | | | | | | | | | | | 1 day | | | | Not available | |
| All other languages | | | | | | | | | | | | 3 days | | | | 2 days | |
| **FULL TRANSLATIONS:** | | | | | | | | | | | | | | | | | |
| Cambodian, Chinese, Korean, Laotian, Russian, Spanish, and Vietnamese | | | | | | | | | | | | 5 day | | | | 2 days | |
| All other languages | | | | | | | | | | | | 7 days | | | | 3 days | |
| FOR CONTRACTOR USE ONLY | | | | | | | | | | | | | | | | | |
| FOR DEPARTMENT OF SOCIAL AND HEALTH SERVICES USE ONLY | | | | | | | | | | | | | | | | | |
| **Approved**  **Completed** | | | | | | RECEIVED BY: | | | | | DATE RECEIVED | | | | | | |

DSHS 17-120 (REV. 09/2000

## ATTACHMENT L - Translation Review Guidelines

Check the translated document against the English version to identify translation errors, if any. Mark changes in ink and write clearly.

\* Identify the grammatical errors that **distort the intent** of the original English text and **suggest corrections. Please** give brief explanation for suggestion.

\* Identify the words that **alter the meaning** of the original English words and **suggest corrections.** Please give brief explanation for suggestion.

\* Identify the words that you think **clients will not under­stand** and **suggest alternatives,** please indicate what original translation means.

\* Circle **misspelled words** and indicate them by writing ‘‘spelling’’ beside them.

**Notes:**

**1. Do not** suggest any changes if translation is understandable to clients and will not cause any misunderstanding.

**2. Do not** suggest word changes based on regionalism or personal preference such as synonyms.

1. \*DSHS considers translation projects to be complete when:

   * All requested language documents have been submitted to DSHS; and

   All requested language documents are technically accurate (i.e., created using the correct fonts, are formatted correctly, and can be opened and printed). [↑](#footnote-ref-1)