

INTERPRETING IN HEALTH CARE SETTINGS

The Registry of Interpreters for the Deaf, Inc., (RID) Standard Practice Paper (SPP) provides a framework of basic, respectable standards for RID members' professional work and conduct with consumers. This paper also provides specific information about the practice setting. This document is intended to raise awareness, educate, guide and encourage sound basic methods of professional practice. The SPP should be considered by members in arriving at an appropriate course of action with respect to their practice and professional conduct.

It is hoped that the standards will promote commitment to the pursuit of excellence in the practice of interpreting and be used for public distribution and advocacy.

About Interpreting in Health Care Settings

Effective communication between consumers who are deaf and health care providers is essential. When the consumers and health care providers do not share a common language, a qualified sign language interpreter can facilitate communication. A consumer who is deaf could be the patient, a relative or companion who is involved in the patient's health care.

What is the legal basis for providing sign language interpreters in health care settings?

The Americans with Disabilities Act, 42 U.S.C. §12101, et seq. (ADA), Section 504 of the Rehabilitation Act 29 U.S.C. §794 et seq., and any state laws which apply, impose requirements on various public and private facilities, including most health care offices and hospitals. These laws prohibit discrimination against individuals with disabilities, including depriving them of the full and equal enjoyment of the goods, services, facilities, privileges, advantages or accommodations of any place of public accommodation.

How do I know a sign language interpreter will be needed?

The patient, family member or companion, who is deaf, may request an interpreter, or when the health care provider becomes aware that the consumer(s) is deaf, an interpreter can be contracted.

What areas of health care may require the use of a sign language interpreter?

Sign language interpreters are necessary in any situation in which the information to be exchanged requires effective communication. This will include but is not limited to:

- Taking a patient's medical history
- Giving diagnoses
- Performing medical procedures
- Explaining treatment planning
- Explaining medicine prescription and regimen
- Providing patient education or counseling
- Describing discharge and follow up plans
- Admitting to emergency departments/urgent care

What is a “qualified sign language interpreter?”

According to the Americans with Disabilities Act (1990), a qualified sign language interpreter is “an interpreter who is able to interpret effectively, accurately and impartially both receptively and expressively, using any specialized vocabulary necessary for effective communication.” (<http://www.ada.gov/pca-toolkit/chap3toolkit.htm>)

An interpreter that is certified by RID or NAD can provide the best assurance of meeting this standard. Certified interpreters have met national professional standards of competency in the language, interpretation and practice of ethics and professionalism. Some interpreters have additional expertise interpreting in the health care setting and should be sought out initially.

Some situations may require an interpreter with a particular area of specialization. Examples of this would be tactile interpreters (interpreters who work with Deaf-Blind individuals), trilingual interpreters and certified deaf interpreters (CDI). [For more information regarding CDIs, go to www.rid.org.]

What is the role of the sign language interpreter?

Interpreters are members of the health care team. Their role on the health care team is to facilitate linguistic and cultural communication. RID and NAD certified interpreters adhere to the NAD-RID Code of Professional Conduct of which confidentiality is a fundamental tenet. Some healthcare facilities request that interpreters have a signed Health Insurance Portability and Accountability Act (HIPAA) business agreement on file. Like other members of the health care team, interpreters are mindful about their safety, security and self-care.

Why should family members, friends or healthcare staff not serve as sign language interpreters?

Someone who has only a rudimentary familiarity with sign language or fingerspelling or who does not possess the training and ability to interpret is not a qualified sign language interpreter. Family members, friends and health care staff are not bound by the NAD-RID Code of Professional Conduct, and there is no assurance the interpretation will be complete and reliable or privacy issues will not be compromised.

How can a qualified sign language interpreter be accessed?

Qualified interpreters either maintain a private practice or work through interpreter referral agencies. RID maintains a list of certified interpreters on its Web Site (www.rid.org), and local and state agencies working with people who are deaf can provide information on appropriate interpreter referral agencies. It is vital that information on how to access an interpreter be readily available at all times the health care facility is open, and staff are knowledgeable about the facility’s policies and procedures regarding interpreters.

While the use of live interpreters is always preferable, recent video conferencing technology enables sign language interpreters to be accessed through Video Remote Interpreting (VRI). This mode of communication has limitations and should be considered carefully.

How do I share feedback with the sign language interpreter?

Like any good working relationship, there are times when the health care provider and interpreter may need to discuss challenges that occurred during the interpreting interaction. The goal of the discussion is to improve the working relationship between the participants.

How do I file a complaint about a sign language interpreter?

RID has a formal complaint system, called the Ethical Practices System (EPS), to deal with issues that occur between an interpreter and a health care provider or a patient who is deaf. Though RID encourages individual parties to initially attempt to resolve the issues privately, there are occasions where RID may help the parties come to a resolution. The EPS has a two-tiered system; mediation and adjudication. Generally, all cases go to mediation. If a resolution cannot be reached, cases then go to adjudication, where a panel will decide the case's outcome. To learn more about the EPS, filing time lines and complaint criteria and to access the complaint forms, go to www.rid.org.

Should the health care facility document that a sign language interpreter was present?

In the field of health care, documentation in a patient's chart is imperative to verify that services were provided. Like any other service, provision of a sign language interpreter must be documented within the patient's chart either by the interpreter or by another member of the health care team.

ADDITIONAL RESOURCES

Registry of Interpreters for the Deaf, Inc.
www.rid.org

National Association for the Deaf
www.nad.org

U.S. Department of Justice
www.usdoj.gov

Equal Employment Opportunity Commission
www.eeoc.gov

The CATIE Center at the College of St. Catherine
www.medicalinterpreting.org