

Your Guide to Interpreter Services

Our Language Assistance Plan was created to help us provide high quality interpreter services to patients and members who have limited English proficiency (LEP) or who are deaf or hard-of-hearing. We want to reduce health care disparities among the people we serve and provide care that is safe, timely, efficient, effective, equitable and patient & member centered. *Your Guide to Interpreter Services* is designed to make it easy for you to serve patients and members who need language assistance.

Our interpreter services will be based on best practices to improve quality and reduce disparities. These practices include:

- Use of professional interpreters whenever possible, rather than family members or friends.
- Documentation of interpreter services.

This guide is about spoken language and sign language assistance services. It is **not** about translation of written materials, which is another type of language assistance. That topic will be addressed later.

Contents of this guide:

- How we provide interpreter services
- How to arrange these services
- How to use the Language Line
- How to use bilingual staff
- How to respond if a patient or member wants to use family or friends to interpret
- How to respond to questions from or about interpreters
- Where to get more information

To review the complete Language Assistance Plan and related information, visit the Cross Cultural Care and Service site on ERIC (accessible through “Quick Links”).

How we provide interpreter services

We provide high quality, professional language assistance to our patients and members in several ways.

- ❖ **Professional trained interpreters who do face-to-face interpretation.** We do this through our own staff and through contracted vendor agencies.

Staff interpreters

- We have staff interpreters in some of our locations: Regions Hospital, HealthPartners Specialty Center, Midway Clinic, Center for International Health, and St. Paul Clinic. Over time we will add staff interpreters to other clinics as volume warrants.
- Staff interpreters are available in the following languages: American Sign Language, Amharic, Cambodian, Hmong, Lao, Russian, Somali, Spanish, Thai, Vietnamese.
- Patient satisfaction surveys tell us that satisfaction is highest when our staff interpreters are used. Our costs are lower when we use staff interpreters.
- In locations where we have staff interpreters, in most cases they are the interpreters who should be used.

Contracted agency interpreters

- We contract with selected agencies to provide face-to-face interpreter services in locations where we don't have staff interpreters in the needed language and to serve patients when staff aren't available.
- Only contracted interpreter vendors should be used.

- ❖ **The Language Line**

- Provides interpreter services over the phone
- More than 150 languages are available round-the-clock
- Best for when patients or members are on the phone; when interpreter is needed instantly; when services are needed for an unusual or infrequently encountered language; or when the patient and provider have waited more than five minutes beyond the start time for an appointment for a professional interpreter to arrive.

- ❖ **Bilingual staff**

- Some staff are bilingual and may provide direct language assistance services within the scope of their job.

- ❖ **Communication services for deaf and hard-of-hearing people**

These services are different than language assistance services for people with limited English proficiency. We serve our deaf and hard of hearing patients through:

- Sign language interpreters
- Written communication & visual aids
- Adaptive equipment such as TDDs (telecommunication devices for the deaf)
- Closed-caption television

IMPORTANT NOTE

Use of family members or friends is not considered best practice for many quality and confidentiality reasons. See page 15 for suggestions on how to encourage use of professional interpreters.

How to arrange an interpreter

When scheduling an appointment, verify that the language information we have is correct and complete. Patients should be asked what language they'd like to use with the provider. If they respond with anything other than English, an interpreter should be scheduled.

All patients requiring an interpreter should have an interpreter scheduled to accompany them to their appointments regardless of whether their provider is bilingual or the patient requests that a family member interpret. The interpreter is valuable for the check-in and other services the patient receives while at their visit (rooming nurse, lab, tests, etc.)

The specific guidelines and procedures for how to arrange an interpreter vary by location. Check with your supervisor on how your area scheduled interpreters. In general, interpreter services are scheduled on Epic using "advanced visit types" or standard interpreter scheduling protocol, or they are scheduled through the Appointment Center.

We contract with selected external agencies and generally only those agencies should be used. Clinics have designated their preferred agency among the contracted agencies and in most cases that's who should be scheduled when an agency is used.

Interpreters from contracted agencies for patients who are members of a health plan's public program (e.g. a member of the Medica Medicaid plan) must be part of that health plan's contracted network of interpreter vendors..

The following pages indicate how to arrange interpreter services by location.

Documentation

- ❖ Use of any kind of interpreter, including a family member or friend, should be documented in the record at each encounter.
- ❖ If the patient or member declines the use of a professional interpreter, this should be documented in the record.

The Language Line

The Language Line is available round-the-clock and offers phone interpretation in more than 150 languages. The Language Line is used:

- If an interpreter isn't available for a clinic or hospital appointment
- If the patient or member is calling us on the phone
- If we need to contact the patient or member between visits
- If the patient and provider have waited more than five minutes from the appointment time for the professional interpreter to arrive

What equipment is needed?

The Language Line can be used in rooms with a phone jack. We most commonly use it with a speaker phone that has a "conference" function, although it can also be used with a phone with multiple handsets or by passing a standard phone back and forth between the patient and provider.

How to use the Language Line

It's easy to use the Language Line. Basically you just dial the toll-free number, provide account information and request the language needed. See page 11 for specific instructions.

Tips for Using Language Line

Working with an interpreter

Give the interpreter specific questions to relay to the patient or member. Group your thoughts or questions to help the conversation flow quickly.

Interpreter identification

Language Line interpreters identify themselves by first name and number only. For confidentiality reasons, they do not divulge either their full names or phone numbers.

Length of call

Expect interpreted comments to run a bit longer than English phrases. Interpreters convey meaning for meaning, not word for word. Concepts familiar to us often require explanation or elaboration in other languages or cultures.

Line quality problems

If you experience problems with the sound quality and the Language Line operator is still on the line, ask him or her to re-dial the interpreter. If the Language Line operator has left the line, call back, explain the problem and ask the operator to stay on the line for sound quality.

Give the Language Line a Try!

If you've never used the Language Line, it may seem intimidating. You can hear a recorded demonstration of over-the-phone interpretation by calling the Language Line demonstration line at 1-800-821-0301 or visit their website at www.LanguageLine.com.

Using the Language Line

At Regions the Language Line is accessed through the hospital operator. At the HealthPartners Specialty Center the Language Line should be accessed through the switchboard operator, but can be accessed directly if the operator is not available. In most our other locations and programs, the Language Line is accessed locally by the department or service.

1. **At all locations:** Try to determine the language needed and the patient's phone number. Ask the patient to hold for an interpreter. Non-English-speaking people often recognize "interpreter" and will hold while you get one.
2. Press the "conference" button to put the patient on hold. (If you know the language you need, you can call then Language Line first and then call the patient.)
3. **Regions** staff should dial "0" for the Regions operator to access the Language Line. **HealthPartners Specialty Center** staff should dial "0" for assistance from the switchboard operator, if available. Otherwise call directly. **Most other staff** should call the number assigned to their site to access the Language Line. *Check with your supervisor for your site's number.*
4. When you reach the Language Line, an operator will ask for the language you need, client ID, organization name and personal code. *Since each location and program has different accounts, get this information from your supervisor and fill it in here.*
 - Client ID: _____
 - Organization name: _____
 - Personal code is the accounting unit code : _____
5. Brief the interpreter on the nature of the call and what you want to accomplish.
6. Press the "conference" button to connect you, the interpreter and the patient.
7. If the patient didn't stay on the line, put the interpreter on conference hold, dial 9 and the patient's phone number.
8. Say "end of call" to the interpreter when the call is finished.

Click here to check out commonly asked questions about Language Line:

http://www.language.com/pdf/QnA_Interpretation_062204.pdf

Use of bilingual staff

Bilingual providers and staff can communicate directly with patients and members in their preferred language. Bilingual providers and staff must stay within the scope of their job description when providing bilingual care and services.

- Bilingual staff should not routinely act as third-party interpreters since they have not been trained in third-party interpretation.
- They may interpret if they are competent in the skill of interpreting both in writing and orally.
- Bilingual staff must be aware of potential conflicts of interest.

Competency requires more than just self-identification as bilingual. It is highly recommended that competency be demonstrated in some manner.

What if the patient wants to use a family member or friend?

Use of nonprofessional interpreters, such as family members and friends, does not represent best practice. Use of family members raises quality and confidentiality concerns.

- Greater likelihood of medical errors
- Mistaken naming of body parts
- Mental health diagnoses being missed due to family shame
- Inadequate testing due to inadequate history, etc.
- Breach of confidentiality
- Reluctance of patients or members to disclose information critical to their situation.

We want to encourage use of professional interpreters whenever possible.

- It is appropriate to suggest that the patient consider a professional interpreter.
- We must make the patient aware that he or she has the option of having the provider arrange a professional interpreter without charge.
- We cannot require a person with limited English proficiency to use a family member or friend as an interpreter.
- We cannot prohibit use of family or friends if the patient or member insists on it, but we should try to encourage use of professional interpreters.

Documentation is important

- ❖ Use of any kind of interpreter, including a family member or friend, should be documented in the record at each encounter.
- ❖ If the patient or member declines the use of a professional interpreter, this should be documented in the record.

Here are some hints on how to encourage use of professional interpreters.

- **Thank the family member for their caring and concern and willingness to interpret:**
“Thank you very much for offering to interpret. However, we have a policy in our (clinic/hospital) to use our professional interpreters when they are available. I am sure your (parent/child/relative) appreciates your help, and today you can relax and be a (daughter/son/spouse) instead of being an interpreter!”
- **Explain that you as a doctor, nurse or other staff member prefer to work with professional interpreters:** “I prefer to work with professional interpreters because I’m used to working with them. They are trained to understand health care and medical terms that your (family member/friend) might not know. It also lets your (family member/friend) relax and just be supportive as a (family member/friend).”
- **If, when making the appointment, the patient says that he or she does not want to have an interpreter, you as a medical office assistant or scheduler should still order one and say:** “I have been instructed to have a medically trained interpreter at your appointment. The interpreter is for the provider and office staff. You and your provider can make a decision about how best to use the interpreter at the time of service.”
- **If, when making the appointment, the patient says she doesn’t want an interpreter at the appointment and will bring a family member, you as a medical office assistant or scheduler can say:** “If you’d like to bring your nephew with you, that would be fine, but I am going to order an interpreter for the provider’s and staff’s benefit. I have been instructed to have a medically trained interpreter at your appointment. You and your provider can make a decision about using the interpreter at your appointment.”

Family members often don’t want to be the interpreter. Explaining the reasons listed above gives them a reason not to do so.

Many younger people are obligated by social and cultural norms to care for their parents, including being an interpreter. If we put the onus on ourselves as care providers, then it eases the mind of the family member, because “the doctor asked for the professional interpreter,” instead of “I don’t want to interpret for you, Mom or Dad.”

Document Use of Interpreter

Use of any kind of interpreter, including a family member or friend, should be documented in the record at each encounter.

If a patient or member declines the use of a professional interpreter, this should be documented in the record.

How to Handle Questions From or About Interpreters

Here are suggested responses to questions or situations that may arise with interpreters.

If a health care provider has concerns about the quality or service provided by the interpreter:

The provider can thank the interpreter and let them know their service is no longer needed in the visit. The Language Line would be an alternative way to meet the patient's needs. In addition to addressing the immediate need, it's also important to provide feedback to the supervisor of the interpreter. For staff interpreters, please talk to the interpreter's supervisor. For contracted interpreters, please contact interpreterservsctrl@healthpartners.com which will get your concern to the appropriate area.

When the interpreter on the phone wants to be the interpreter at the visit, but does not work for the preferred vendor designated by our clinic:

"The clinic prefers that I book their interpreters through (agency name), so I will be ordering an interpreter through that agency." (If the patient is insistent on using a nonpreferred interpreter, they may, but this should be documented in the appointment notes.)

When the interpreter calls to make an appointment for the patient and the patient is not on the phone with the interpreter:

"Is the patient on the line with you? If not, I can give the patient a call with the assistance of the Language Line."

When the scheduled interpreter says she wants to be arranged through another agency. (Sometimes interpreters tell us they can make more money if we change our order.):

"The clinic prefers me to book their interpreters through (agency name), so if you do not want to be ordered through (agency name), I will be happy to order another interpreter."

If a contracted interpreter says he will also provide a ride to the patient (and expects to be reimbursed): "We are committed to making sure our patients have transportation to their appointments. If (patient) is covered by HealthPartners Care, I will transfer you to Ride Care to make those arrangements." (Note: Except for HealthPartners Care, patients do not have coverage under a health plan for transportation.)

Got questions? Where to get more information

Here are some resources that can help answer your questions about language assistance services.

- ❖ Visit the “Cross Cultural Care & Service” site on ERIC.
The information and resources in the “Interpreter Services” section of this site are frequently updated, so check it out when you want information.
- ❖ Email Interpreter Services Central: interpreterservsctrl@healthpartners.com

This is your central resource for questions related to Interpreter Services.

Simply email your question and it will be sent to the appropriate person who can answer it. This person is expected to respond to you within 24 hours.

Note: Interpreter Services Central is **not** designed for immediate, urgent questions. For those, consult with your supervisor.