Language Access Services Policy and Health Care Interpreters

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Presentation Overview

• Language Access Services Policy
• Definition
• The need for Health Care Interpreters in Oregon
• Legal and policy citations
• Professional vs. ad hoc interpreters
• Keys to quality health care interpretation
Patient in Distress Due to Language Barrier

• Can this happen to me?

• http://www.youtube.com/watch?v=twINuqacDdY
In Oregon

- 541,345 people speak a language other than English
- 228,891 people are Limited English Proficient (LEP) population
- Top 6 languages: Spanish, Chinese, Vietnamese, Russian, Somali, Korean

U.S. Census Bureau, 2011, American Community Survey
Shifting Demographics 1990-2011

Source: "U.S. Census Bureau, 1990, 2000, 2011, American Community Survey"
Language Access Services

- Having an Alternate Formats and Language Access Service Policy is a fundamental strategy for any health system organization to ensure equity in the delivery of healthcare and ultimately elimination of health disparities for our limited English proficient, Deaf, hard of hearing, speech impaired, and for our blind patients.
Language Access Policy

- Providing culturally and linguistically appropriate care with a high quality of healthcare interpretation service,
- Translation of documents in other language besides English
- Signage
- Sign language interpreters
- Alternate formats (which include large prints, Braille, hearing assistance for hard of hearing patients) and
- Bilingual proficiency testing standards for bilingual personnel
How to Create a Language Access Services Policy

1. Gain commitment and authority from your agency’s leaders to do it.

2. Gather data of the population you serve (Race, ethnicity, language and disability).

3. Hire a Language Access Services Coordinator or a Project Manager to do it. This work requires an individual who has vast knowledge of language access services or project management experience.
How to Create a Language Access Services Policy

4. Assemble a language access services and alternate format steering committee to guide your efforts, and create a timeline chart.

5. Conduct a “Self Assessment Evaluation” to understand how your agency interacts with LEP and people with disabilities.

6. Write a policy, a fiscal impact analysis, and an implementation plan.

7. Prepare strategies for monitoring progress and/or yearly evaluation.

8. Periodically review and update as needed.
Alternate Formats and Language Access Services Policy
Implementation Elements

- Bilingual Proficiency Standards
  - Position description
  - Pay differential
  - Testing
  - Resources and support

- Document Translation
  - Quality assurance
  - Cost
  - Contracting
  - Timeliness

- Individual (Public) Civil Rights
  - ADA requirements

- Signage
  - Facilities
  - Location

- Personnel Training
  - Civil rights
  - Policy compliance
  - Work with publications
  - Work with interpreters

- Fonts and Alternate Formats
  - ADA requirements

- Use of Certified Interpreters for Specific Specialties
  - Contract with language service providers and translators

Title VI Civil Rights Act
Americans with Disabilities Act
Goal of DHS/OHA Policy

Provide meaningful access to all of the services that DHS and OHA provide.

DHS and OHA Policy (excerpt)

Each DHS and OHA program will include in their delivery of services access to translations, oral and sign language interpreters, and other alternate methods of communications for non-English speaking persons, limited English proficiency (LEP) persons, and the blind, deaf, and hearing impaired persons in our communities”. (August 25, 2014)
Oregon’s approach to Health Care Interpretation

- Health Care Interpreters and Traditional health Workers
- Overview of the Oregon Health Care Interpreter Program
- Qualification and Certification
- Challenges of Delivery Language Access Services in Rural Oregon
Difference Between Interpretation and Translation

Interpretation
- oral
- Sign language

Translation - written
What is a Health Care Interpreter?

“Health care interpreter” means a person who is readily able to communicate with a person with limited English proficiency and to accurately translate the written or oral statements of the person with limited English proficiency into English, and who is readily able to translate the written or oral statements of other persons into the language of the person with limited English proficiency.

ORS 413.550
Language as a Barrier to Care

Limited English (LEP) proficiency patients:

- Have difficulty accessing care;
- Receive fewer preventive services;
- Are less likely to understand and follow medication directions;
- Have poorer health outcomes.

Qualified and Certified interpreters play a vital role in helping LEP patients access the care they need.

Source: New England Journal of Medicine
Key Citations in Law and Policy

Federal

- Federal Civil Rights Act (1964)
- 2004 Policy Guidance regarding Title VI, Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons

“No person in the United States shall, on the ground of race, color or national origin, be ... subjected to discrimination under any program or activity receiving Federal financial assistance.”

President Johnson signs the Civil Rights Act
July 2, 1964
Key Citations in Law and Policy

Oregon Health Care Transformation Legislation
- SB 1580
- OAR 410-141 (August 2012)

Oregon HCI Statute and Rule
- ORS 413.550 (2001)
- OAR 333-002 (March 2011)
Professional vs. Ad Hoc Health Care Interpreters

• Trained, certified interpreters facilitate timely and accurate communication between patients and providers, which improves health outcomes and prevents errors.

• *Ad hoc* interpreters include family members, nurses, social workers and others without interpreter training or certification.

• Use of *ad hoc* interpreters compromises confidentiality, leads to mistakes, and is ethically troublesome. In many cases, patients with family members acting as interpreters omit essential information due to embarrassment.
Traditional health workers often function as cultural brokers for the health care system and may have bilingual skills. However, they are not qualified to act as health care interpreters unless they are specifically credentialed as either Qualified or Certified Interpreters.
Keys to Quality Health Care Interpretation

• Systems accurately identify the client’s preferred language for health services, and communicate that information to providers

• Adequate pool of trained and competent health care interpreters (in Oregon - Qualified or Certified)

• Policies and systems to assure that interpreters are accessible and available when needed.

• Health care providers who are familiar with the role of health care interpreters and skilled in working with them.

• Client confidence in the quality and confidentiality of interpreter services
Oregon Health Care Interpreter Certification Program

Oregon’s Health Care Interpreter Certification Program includes a registry and two levels of credentialing (qualification and certification).

Registration: At least 18, high school diploma, fluent in English and another language, review and agree to follow ethics and practice standards. The state makes no claim as to the competence of registered interpreters.
Qualified Interpreter Requirements

Meet all of the requirements for registration plus:

- At least 60 hours of formal health care interpreter training.
- At least 40 hours of interpreting experience.
- Demonstrate proficiency in English and the target language by passing a language proficiency evaluation test from an Oregon approved testing center – or having met equivalent language proficiency requirements.

Certified Interpreter Requirements

Meet all of the requirements for qualification plus:

- At least 80 hours of interpreting experience (40 hours additional to the qualification requirement)
- Pass an oral and written national certification test from either the National Board of Certification for Medical Interpreters (NBCMI) or the Certification Commission for Health Care Interpreters (CCHI)
**Important Points to Remember:**

**Data**
- To better serve your community you need to know it.
- Data on race, ethnicity and language.

**Service**
- Language Access Policies
- Human Resources (Bilingual staff and providers)
- Translations
- Health Literacy

**Operations**
- Electronic Health Records
- Provider Education – Cultural Competency
- Risk Management

**Community**
- Building coalitions
- Looking for talent outside of the healthcare scope
- Best Practices
Resources

  – Language Access planning tools, sample materials, “I speak” cards” free foreign language fonts, citations, etc.

• OHA Approved Language Proficiency Testing Centers
  – Language Line University [www.languageline.com](http://www.languageline.com)
  – Language Testing International [www.languagetesting.com](http://www.languagetesting.com)

• OHA Approved HCI Certification Testing
  – The National Board of Certification for Medical Interpreters
  – The Certification Commission for Healthcare Interpreters

• OHA Approved HCI Training Programs
  - [http://www.oregon.gov/oha/oei/Pages/_hci-training.aspx](http://www.oregon.gov/oha/oei/Pages/_hci-training.aspx)
Thank You!

• Time for Q & A

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