PURPOSE:
The most significant legal statute regarding language access is Title VI of the Civil Rights Act of 1964. Under Title VI, no program or activity receiving federal financial assistance may discriminate on the basis of national origin, including language and therefore applies to Limited English Proficient (LEP) immigrants. To further ensure compliance with Title VI, Executive Order 13166, was issued by President Clinton in 2000. This executive order was reaffirmed in 2002 by the Bush Administration in a memorandum by Assistant Attorney General Ralph F. Boyd, Jr. communicated to the Heads of Federal Agencies, General Counsels and Civil Rights Directors.

Best practice guidelines dictate the use of trained interpreters. Barton Health’s medical interpreters are trained, qualified, and abide by a professional code of ethics, and Barton Health’s confidentiality and privacy policies. Barton Health also utilizes external contract medical interpreters who are assessed and trained in medical interpretation. They are utilized for languages that are less frequently requested and that are not readily available in-house. These interpreters abide by the same professional standards and ethics.

Ensures LEP patients, families, and/or their legally designated surrogate decision-makers experience:

• Barrier-free access to medically necessary care
• Are informed of their rights and responsibilities in a manner they understand
• Are informed and make decisions regarding their care
• Maintain the right to accept or refuse treatment

POLICY

I. Barton Health medical interpreters may not translate documents: they are not trained to translate documents.

II. It is the responsibility of Barton Health to meet the language needs of LEP patients, families, and /or their legally designated surrogate decision-makers and customers as follows:
Ensure that qualified medical interpreters such as onsite interpreters, telephonic interpreters, or video remote interpreters are available.

Ensure that patients are provided with a means to request interpreters and to communicate effectively with medical center staff concerning services and benefits.

Notify the patient/guest that interpreter services are available without charge to the patient, as well as ensure that all information communicated with the aid of an interpreter is confidential.

III. Audit and Regular Review of Language Access Needs:
It shall be the policy of Barton Health to conduct an annual review of language access needs of the patient population of Barton Health. This shall include a statistical survey of the language needs of the users of Barton Health and its service areas. The review shall annually update the list of Threshold Languages and Frequently Utilized Languages of Barton Health. This summary is presented annually at a management level meeting or Shared Governance Meeting.

PROCEDURE

I. Informing patients of their rights to interpreter services:

- All areas of first patient contact (main entry points) shall be equipped with the Language Identification Card to identify the patient’s primary language. Barton Health posts notices that advise LEP patients and their families of the availability of medical interpreters in their language in these areas. The notices indicate that the interpreting is free of charge. These signs are in Spanish and English.

- To ensure accurate interpretation and to provide customer service a medical interpreter, shall be used at all points of contact: upon point of entry into Barton Health, during the admission process, all medical procedures, and hospital stay.

- Upon admission: patients shall be asked 1) primary language, and 2) interpreter needed.

- Family members, friends, and minors are not permitted to interpret unless it is an emergency situation- pending the arrival of a qualified medical interpreter (see IV, D).

II. Language Identification: If the patient’s language is not immediately recognized:

- To determine which language needed, use the Language Identification Card located on the Barton Intranet. Offer the card to the patient so they can point to their needed language of service. Other versions of the Language Identification Card and posters are available upon request to post near work stations.

- If the correct language still cannot be identified, the patient may have a passport or other documentation that will identify the language in question.

- The telephonic interpreter may also be able to identify the patient’s language.

- The appropriate language is then recorded in the registration system’s patient language field. The need for an interpreter is also documented in the appropriate field.
III. Selection of Interpreter Service:
Interpreter resources may include any combination of onsite, telephonic or video remote interpreters. Services should normally be utilized in the following order, taking into consideration the timeliness of service to our customer.

A. Onsite Interpreter Services – A Barton Health onsite interpreter should be the first option used for interpretation whenever possible. This option provides interpreters for face-to-face communication. It is especially important to use every effort to use an in-person interpreter for end of life situations, informed consent process, and psychological conditions. Bilingual employees that are not on the Medical Interpreter List may not interpret.

B. Remote Video and Telephonic Interpreter Services – These options should be used after all other options stated above are exhausted. The telephonic options should be used for communications of short duration, and for calling or receiving calls from LEP patients. Use telephonic services when a LEP patient or family member needs to be contacted telephonically.

IV. Obtaining an Interpreter:

A. Onsite Interpreter- The Medical Interpreter List is located on the Barton Intranet. Always reference the online document as this list is updated regularly. Call a medical interpreter in the needed language. They are dual role interpreters and may refuse a session; continue to locate a medical interpreter on the list. Bilingual employees that are not listed on the Medical Interpreter List may not interpret.

B. Video Remote Interpreter- Follow the written instructions attached to the mobile video unit.

- The unit, policy, and “How to Use Guide” are secured to the unit.
- Language Access Services will determine department location of the Video Remote Interpreter mobile unit based on individual department needs.

- Unplug Video Remote Interpreter mobile unit and wheel into the patient’s room for use. Position the unit so that the patient and interpreter can see each other (unless privacy during examination is an issue). The computer is to be left on at all times for timely access to the interpreter. Follow the written instructions attached to the unit. Return the unit to its station, and plug the unit in to charge.

C. Telephonic Interpreter- Call the phone interpreter service listed at the bottom of the Medical Interpreter List on the Barton Intranet, available 24/7/365. You will be asked what language you need, and from what facility you are calling.

V. Refusal of Interpreter Services by patient- Minor children (under the age of 18) are not to interpret for LEP patients/surrogate decision makers. The following circumstances may occur:

- An adult family member or friend, over the age of 18, may be used to interpret in an emergency situation, pending the arrival of a qualified
The patient may waive the right to a medical interpreter after being advised that a qualified interpreter is available at no cost to the patient/family. In such a case, the patient/surrogate decision-maker will sign a *Medical Interpreter Refusal form*. This document is available on Barton Intranet.

- Even if a patient waives the right to an interpreter, a qualified medical interpreter shall be used on behalf of Barton Health to ensure accuracy and completeness be it via in person, video, or telephonic. The Barton Health medical interpreter shall stay at the interpreting session to ensure accuracy for the provider.

- In emergency situations, care is provided in accordance with standard medical practice. Interpreters are sought promptly. However, emergency care is not delayed pending the arrival of an interpreter.

### VI. Use of non-approved Barton Health medical interpreter:
Under no circumstances (except medical emergency) shall a Barton Health employee use a non-approved Barton Health medical interpreter, or contracted service not provided by Barton Health. Approved qualified interpreters and contract services are listed on the *Medical Interpreter List* on the Barton Intranet. Both the person who requests the non-qualified interpreter, and the person who is not qualified but interprets, may be subject to disciplinary action. Anyone who observes the use of a non-qualified interpreter may report it in Barton reporting system immediately (anonymous reporting available).

### VII. Documentation:
Document in the patient records that interpretation services were used. Indicate date, language, time, and the source of interpretation: On-site, Telephone, Video Remote etc. Interpreters are to remain neutral and are not to witness consent forms or any other documents.

### VIII. “How to use a Medical Interpreter” Training:
During all new employee general orientation LAS department will provide education on access and use of interpreter services. LAS will provide updates and/or refresher classes to all staff and departments upon request of if deemed necessary. Department directors may also contact LAS to schedule training sessions for staff.

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**ATTACHMENTS**

- Medical Interpreter List
- Language Identification Card
Definitions:

LAS- Language Access Services

LEP- Limited English Proficient

Translation- A rendering from one written language to a different written language. Conversion of a written text into a written text in a second language corresponding to and equivalent in meaning to the text in the first language.

Interpret- An oral transmission from one spoken language to a different spoken language. There must be an English-speaking provider, non-English speaking patient, and an interpreter present to qualify as an interpreting session.

Qualified Medical Interpreters: One who: (1) has had their language skills assessed; (2) has been trained in healthcare interpreting; (3) adheres to the professional code of ethics and protocols of healthcare interpreters; (4) is knowledgeable about medical terminology; and (5) can accurately and completely render communication from one language to another.

Video Remote Interpreting – A form of remote video interpreting that offers the delivery of interpreter services through videoconferencing technology. In this format, the interpreter is at a different physical location than the patient/physician encounter. Videoconferencing units show a visual image of the patient and provider to the interpreter and a visual image of the interpreter to the patient and provider, along with an audio connection of their exchange.

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