

POLICY TITLE: Language Skills Assessment for Qualified Dual Role Interpreters and **Bilingual/Multilingual Employees APPLICABLE FACILITIES: ⊠EHC** DESJH □EUOSH □EWWH □RJV-ERH □RJV-ESOP □TEC/ESA **EFFECTIVE DATE: 2/20/2018** ORIGINATION DATE: 2/14/2018

SCOPE:

All Emory Healthcare Employees.

PURPOSE:

To identify a process by which the language skills of bilingual/multilingual providers and/or other EHC staff may be assessed to determine their ability to communicate effectively in the target language of patients, family members or companions.

POLICY STATEMENT:

Emory Healthcare, Inc. (EHC) is committed to high legal, ethical, moral and governmental standards and meeting our fundamental mission of providing quality care to our patients.

PROCEDURE:

- 1. When a patient, family member or companion is deaf, non-English speaking or is Limited English Proficient (LEP), in order for bilingual/multilingual provider and/or other EHC staff to communicate directly with said patient, family member or companion, in a language other than English, the provider and or staff member must be assessed to determine their ability to communicate effectively in the target language.
- 2. The provider and/or staff member must:
 - a. Pass a nationally recognized *Language Proficiency Oral Assessment test: OR,
 - b. Provide the Emory Medical Interpretation & Translation Services (EMITS) department with a medical degree and certification that the medical degree was obtained in the target language from the medical school.

*The oral assessment test must be given by an approved EHC agency. The provider and/or staff member must receive a passing score, determined by the agency, for approval to be able to communicate directly with said patient, family member or companion, in a language other than English.

Language Proficiency Oral Assessment Test: Tests language skills and provides a measure of competency in the target language. This test is designated for bilingual staff that would like to speak directly to patients, family members in the target language without the use of a qualified or nationally certified Medical interpreter (CMI).



- 3. All assessment tests must be taken at the expense of each staff member unless other arrangement has been approved by the department.
- 4. Once any of the above requirements are fulfilled and documentation has been provided to EMITS, the provider and or staff member will be permitted to communicate directly with patients, family members and or companions, in the target language without the use of a qualified medical interpreter. A copy of the required documentation can either be faxed to 404-686-5454 or emailed to interpreter@emoryhealthcare.org
- 5. Unless the provider and/or staff member is a Qualified Dual Role Interpreter, such provider and or staff member must provide a qualified medical interpreter for deaf, non-English speaking or Limited English Proficient (LEP) patients free of charge upon request.
- 6. To be considered a Qualified Dual Role Interpreter, the provider and/or staff member must:
 - a. Complete at least one Interpreter training course of 40 hours in duration or more;
 - b. *Pass a Nationally recognized oral test for medical interpreters; and,
 - c. Provide EMITS with a copy of the certificate of completion of the training course. A copy of the certificate can either be faxed to 404-686-5454 or emailed to <u>interpreter@emoryhealthcare.org</u>

*The oral Interpreter assessment test must be given by an approved EHC agency. The provider and/or staff member must receive a passing score, determined by the agency, for approval to be considered a qualified dual role medical interpreter.

*Interpreter Skills Assessment: Test knowledge of medical vocabulary and the ability to interpret from one language to another. This test is given after the person has taken at least a 40 hour course for medical interpretation.

- 7. To be considered a Nationally Certified Medical Interpreter (CMI), the provider and /or staff member must:
 - a. The provider and/or staff member must provide EMITS with a copy of certification credentials from the National Board of Certification for Medical interpreters or copy of certification credentials from the Commission of Healthcare Interpreters (CCHI). A copy of either certification credentials can either be faxed to 404-686-5454 or emailed to interpreter@emoryhealthcare.org.
 - b. The provider and/or staff member will comply with CEU's annual requirements in order to keep CMI status.

RELATED DOCUMENTS AND LINKS:

- Interpretation Services and Effective Communication for Deaf or Hard of Hearing Persons
- Interpretation Services and Effective Communication for Non-English Speaking or Limited

Language Skills Assessment for Qualified Dual Role Interpreters and Bilingual/Multilingual Employees



English Proficient Persons

DEFINITIONS:

Language Proficiency Assessment: Tests language skills and provides a measure of competency in the target language. This test is designated for bilingual staff that would like to speak directly to patients, family members or visitors in the target language without the use of a qualified or Nationally Certified Medical Interpreter (CMI).

Interpreter Skills Assessment: Tests knowledge of medical vocabulary and the ability to interpret from one language to another. This test is given after the employee has taken at least a 40 hour course for medical interpretation.

Dual Role Qualified Medical Interpreter: A provider and/or staff member of EHC that demonstrates a high level of proficiency in at least two languages and has the appropriate training and experience to interpret with skill and accuracy while adhering to the National Code of Ethics and Standards of Practice by the National Council on Interpreting in Health Care.

Nationally Certified Medical Interpreter (CMI): An interpreter that has been certified as competent by a professional organization or government entity through rigorous testing based on appropriate and consistent criteria.

REFERENCES AND SOURCES OF EVIDENCE:

Advancing Effective Communication, Cultural Competence, and Patient-and Family-Centered Care: A Roadmap for Hospitals. <u>http://jointcommision.org/topics/patient</u> safety.aspx. May 30, 2012.

42 U.S.C. § 12182(a) (Americans with Disabilities Act); 29 U.S.C. § 794(a) (Section 504 of the Rehabilitation Act of 1973); 28 C.F.R. § 36.303(a)(ADA regulations); 28 C.F.R. § 36.303(c) (auxiliary aids, effective communication).

HHS.gov. U.S Department of Health & Human Services Section 1557 of the Patient protection and Affordable Care Act: Ensuring Effective Communication with and Accessibility for Individuals with Disabilities. <u>https://www.hhs.gov/sites/default/files/1557-fs-disability-discrimination-508.pdf</u>

The Joint Commission. (2018). Standard HR.01.01.01, EP 1. *Comprehensive accreditation manual for hospitals: The official handbook*. Oakbrook Terrace, IL: The Joint Commission.

KEY WORDS:

Document Information

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Language Skills Assessment for Qualified Dual Role Interpreters and Bilingual/Multilingual Employees

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