

# University Health Network Policy & Procedure Manual Clinical – Interpretation & Translation Services

## Policy

UHN is committed to providing quality medical interpretation services to patients with [limited English proficiency \(LEP\)](#) and their family members, and patients who are Deaf, deafened and hard of hearing. UHN's Interpretation and Translation Services (ITS) provides [interpretation](#) (verbal) and [translation](#) (written) services to all UHN programs and services, to ensure effective communication between health care providers and LEP or Deaf patients and their families. This policy covers:

- [Interpretation Services](#)
  - a. [Research Projects & International Patients](#)
  - b. [Documentation](#)
  - c. [American Sign Language \(ASL\) Interpretation](#)
  - d. [Cancellation of an Interpreter](#)
  - e. [Refusal to Use a UHN Interpreter](#)
  - f. [Informed Consent](#)
  - g. [Emergency Treatment](#)
  - h. [UHN Phone Interpretation Services](#)
- [Translation Services](#)

### [Interpretation Services](#)

Best practice guidelines dictate the use of trained interpreters. ITS's medical interpreters are tested and trained to work in a medical setting; abide by national standards of practice and a professional code of ethics, and UHN's confidentiality and privacy policies. ITS also utilizes external contract medical interpreters who are tested and trained in medical interpretation. These interpreters also abide by the same professional standards and ethics.

Other sources of informal interpretation services such as family members and untrained staff who speak various languages are **not recommended**. Because effective communication is an integral part of providing safe medical care, qualified medical interpreters should be used wherever possible.

Medical interpretation at UHN is not to be provided by:

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- minors (under the age of 16)
- UHN volunteers, unless they are tested and trained interpreters volunteering or training with ITS
- other patients, family members of other patients, or visitors in the clinic or unit

Where there is an emergency and the delay required to obtain a medical interpreter may put the person at risk of sustaining serious bodily harm, treatment may proceed without the use of a medical interpreter.

It is recognized that UHN has culturally specific programs (such as Portuguese & Asian Mental Health) that often reflects the population it serves. No interpreter is required when the clinician is employed in these types of programs and is required to speak in the patient’s language. In addition, no interpreter is required when staff provide direct patient care in the patient’s language. To do so, staff must use professional judgment to self determine competency in that language.

UHN interpreters are booked with appointments at the three sites. Patients requiring interpretation services should be seen as soon as the interpreter arrives to maximize interpretation resources.

**Research Projects & International Patients**

ITS provides medical interpretation for **research projects**. The primary investigator is responsible for paying the hourly fee of the interpreter plus a nominal administrative processing charge.

ITS provides medical interpretation services for **international patients** (e.g., patients with pre-arranged payment, those without OHIP or those who have private insurance). ITS bills the requestor of the service (see [Non-residents & Uninsured Residents of Canada](#) policy 1.90.011).

**Documentation**

It is the responsibility of the clinician using the interpretation services to document the interpretation interaction and the full name of the person utilized to interpret the clinical interaction, as specifically as possible, i.e., UHN interpreter or ad hoc interpreter (family member or bilingual staff member), in the patient’s chart.

**American Sign Language (ASL) Interpretation**

A Federal Supreme Court decision obligates health care service providers to supply a professional ASL interpreter for all patients who are Deaf, deafened or hard of hearing.

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For a scheduled clinic visit, a minimum of **two to three weeks' advance notice** is required when requesting a contract ASL interpreter. (This is due to the limited availability of professional sign language interpreters within Ontario.) These services will be paid for by ITS only if arranged through ITS.

ITS staff accept urgent requests for emergency patients and Inpatients requiring an ASL interpreter during working hours and make every reasonable effort to fill the request.

Refer to [procedure 2](#) under American Sign Language Interpretation for ASL interpretation required after-hours.

### **Cancellation of an Interpreter**

ITS requires a minimum of 48 hours' notice to cancel an appointment, whenever possible, to maximize resources within the ITS budget. (If the interpreter is not cancelled within this timeframe, ITS is still charged for the service.)

### **Refusal to Use a UHN Interpreter**

UHN will not accommodate requests from a family member or substitute decision-maker (SDM) to decline the services of a medical interpreter.

Where circumstances permit, incapable patients should be included as a party to the decision-making.

Where services of a medical interpreter are declined, staff should:

- Communicate that a medical interpreter is necessary.
- Communicate that the medical interpreter is bound by patient confidentiality.
- In the case of an SDM, reaffirm his/her role and obligations (i.e., acting upon the patient's wishes and, where these are unknown, in the patient's best interest).
- Use additional mediation resources where necessary (e.g., Patient Relations, Bioethics).

If the SDM is also limited English proficient, an interpreter is required to communicate the information that must be provided to the SDM.

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## Informed Consent

A UHN medical interpreter or a phone interpreter **must** be used to obtain consent to treatment from a patient. (Refer to the [Consent to Treatment](#) policy 3.20.001.)

If a qualified face-to-face medical interpreter is unavailable, a telephone interpreter should be contacted. (See [Phone Interpretation Services](#).)

After using telephone interpretation during a consent discussion, the clinician using the interpretation service should write “phone interpreter” and the interpreter’s code number in the area where the interpreter’s name and signature are documented on the [Consent to Treatment](#) (form 2019A).

Patients have the right to make informed refusals to treatment or to hear about treatment, however, the consequences to such refusals have to be made clear.

## Emergency Treatment

Where applicable, the physician proposing and/or administering the treatment must document in the chart that treatment was administered without consent on an emergency basis.

## UHN Phone Interpretation Services

All staff at UHN have access to [Phone Interpretation Services](#) which provides access to professional medical phone interpreters available in over 180 languages, 24 hours a day, 7 days a week.

Since the UHN Phone Interpretation Services is corporately funded, there are no charges to departments for use of this service.

UHN Phone Interpretation Services can be used with an ordinary telephone or with a special telephonic device. Departments interested in obtaining telephone interpretation equipment may request it by completing the Phone Interpretation Service Request form at <http://intranet.uhn.ca/Applications/LanguageLine/>.

Staff are advised to use phone interpretation for urgent, after-hours or weekend interpretation needs, and for short encounters (under 30 minutes), since phone interpretation is more cost-effective than face-to-face interpretation.

In order to access [Phone Interpretation Services](#) after hours, staff should contact the nursing administration coordinator to obtain the **Client ID**.

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All telephonic equipment used to access UHN Phone Interpretation Services should be cleaned thoroughly after each use according to the [Reusable Medical Equipment Disinfection](#) policy 4.40.005.

## **Translation Services**

ITS provides professional, quality-controlled translation services to all UHN programs and services, to facilitate understanding of health education and promotion, clinical diagnostics and procedures, as well as consent to treatment and other vital documents.

Translation projects are contracted out to teams of government certified translators to ensure quality control of the final product.

UHN recognizes that all patients have the right to informed decision-making about their health care and encourages clinical and non-clinical departments and staff to translate written patient education and informational materials to assist in the delivery of quality, enhanced patient-centred care, reduce risk and to help improve overall clinical outcomes.

ITS also manages translation projects for **research projects**. The primary investigator is responsible for paying the costs for the translation plus an administrative processing charge.

Translation services are provided at cost, at competitive market rates:

- European languages (except French): \$0.30 per word
- French and Asian languages: \$0.35 per word

Staff must use professional, certified translators approved by ITS to translate UHN written materials to ensure quality standards.

Before sending documents for translation, Translating Your Materials on the UHN Patient Education Network should be reviewed at [http://intranet.uhn.ca/education/patient\\_ed/materials/translating\\_materials.asp](http://intranet.uhn.ca/education/patient_ed/materials/translating_materials.asp).

## **Definitions**

**Limited English Proficiency (LEP)** – A legal term referring to a level of English proficiency that is insufficient to ensure equal access to medical services without a medical interpreter.

**Interpretation** – Is the act of verbal communication, which is a process of accurate transposition of spoken words from one language to another.

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**Translation** – Is the act of translating a written expression, of the meaning of a word, speech, book, etc in another language.

## Procedure

### Interpretation Services

1. The health care provider or designate determines the need for an interpreter and identifies the language required as soon as the patient is admitted or **before** an outpatient appointment is confirmed.
2. Contact ITS to book an interpreter as soon as possible in order to ensure that the request is filled in a timely fashion.
3. To request an interpreter for an Emergency patient or inpatient, call ITS at 13-6400, and press 1 to book an interpreter.
4. For outpatient clinic appointments or outpatient Medical Imaging appointments, complete the Interpretation Service Request Form from UHN Interpretation & Translation Services Intranet web site at [http://intranet.uhn.ca/departments/interpretation\\_services/](http://intranet.uhn.ca/departments/interpretation_services/).
5. Make any changes or confirmations of appointments with the **ITS booking coordinator**, as soon as possible, at 13-6400 (press 1), not with the individual interpreters.

### American Sign Language Interpretation

1. For Emergency patients or inpatients, call 13-6400 to request an ASL interpreter during working hours.
2. After hours, page 416-715-8423 to request an ASL interpreter.
  - If no response is received, call the Canadian Hearing Society's After-Hours Emergency Interpreter Service at 1-866-256-5142.

### Phone Interpretation Set-up

1. To order Phone Interpretation Services for a department, complete the Phone Interpretation Service Request Form, available online at <http://intranet.uhn.ca/Applications/LanguageLine/>.
2. If an interpreter is needed and UHN Phone Interpretation Service is unavailable in the area, contact ITS (ext. 13-6400) during business hours.

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- Outside of business hours, call the nursing administration coordinator for instructions and the **Client ID**.

## Translation Services

1. After the final draft of the English document requiring translation is approved, establish if the document falls under the category of **patient education** or **general information**.
  - If it is **patient education** material, edit it for plain language (see Publishing with PEN on the Patient Education Network at [http://intranet.uhn.ca/education/patient\\_ed/](http://intranet.uhn.ca/education/patient_ed/)) then submit it for translation through the submission form found within Publishing with PEN.
  - After being translated, the patient education material is sent back to the requestor via the PEN process for the standard PEN evaluation process by patients.
  - If the document is considered **general information** (such as a letter), complete the [Translation Service Request Form](#) on the ITS Intranet web site or e-mail [translation.services@uhn.on.ca](mailto:translation.services@uhn.on.ca) and attach the document. If the document is a letter or other general material, the ITS manager returns the translated document directly to the author.
2. The author of the document may trial the translated version with his/her patients/clients in order to assess the level of understanding of the translated document.
  - If patients/clients **consistently** identify different wording that reflects a more regional or colloquial form of expression, the author contacts the ITS manager to explain and request changes.
3. The ITS manager provides a quotation of the cost:
  - for European languages except French, \$0.30/word
  - for French and Asian Languages, \$0.35/word
  - a 15% Administration Fee applies to the above costs

**Note:** Authorization is required from the requestor before ITS proceeds with the project.
4. ITS bills the requestor's cost centre number internally.

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