

Standards of Practice for Healthcare Interpreters

Pre-conference:

When possible hold a Pre-conference to determine the provider's goal for the medical interview.

Introduction:

Formally introduce yourself to both the patient and provider.

Referrals:

The interpreter is able to refer the patient to the appropriate support services rather than assuming the social work role.

Positioning:

The seating arrangement will be adjusted to ensure the most interaction between the provider and patient.

Privacy:

Allow privacy as dictated by the appointment type.

Body Clues:

Observe and report any body language, cues that might not be observed by the provide.

Communication Modes:

Choose the appropriate mode of interpretation for the specific medical event. First or third person, consecutive versus simultaneous.

Accuracy:

Accurately transmits information between the patient and provider.

No omissions, additions:

The interpreter will not omit, delete or add information to the interpretation session.

Transparency:

Employ transparency as to ensure that communication can be reestablished.

Clarification:

Asks for repetition, explanation or verification of concepts when appropriate.

Confidentiality:

Ensure that confidentiality and the interpreter's Code of Ethics are maintained.

All verbalization will be transmitted:

Informs all parties in the appointment that everything will be transmitted with no exception.

Limited advocacy:

Advocacy is only done upon systemic barriers and is done within a team operation.

Cultural Brokerage:

Cultural brokerage is only done when communication breaks down and is requested by the provider to assist in understating a cultural nuance. Although the interpreter may be a cultural expert it cannot be assumed that an individual will be knowledgeable to all the diversity given within an ethnic group.

The voice of the patient and providers:

The interpreter does not advise, counsel or interject personal opinions.

The interpreter is not the educator or the provider but rather the voice and ears for the parties involved.

Diplomacy:

Diplomatically negotiates difficult situations with patients, providers and staff.

Conference calls:

Encourages conference calls to facilitate communications between the providers and patient.

Transmission of information:

Interpreters shall render the message faithfully, always conveying the content and spirit of the speaker, using language most readily understood by the person whom they service.

Professional conduct:

Interpreters shall accept assignments using discretion with regard to skill, setting, and the consumers involved.

Role:

Formally establishes the interpreter's role from the beginning of the medical appointment.

Clearly established that the interpreter is only the bridge of communication for all spoken prose.

These standards are a compilation of ideas and adaptations from several resources: Medical Interpreting Standards of Practice, Bridging the Gap, Sign Languages Code of Ethics, and OHSU'S Medical Interpreter Program and now used with National Council of Healthcare Interpreting.

Name of the Interpreter: _____ Date: _____