Medical Interpreters (Language Access)

I. DEFINITIONS

A. **Medical Interpreter:** A trained and qualified individual fluent in English and a necessary target language who can accurately speak, read, and readily interpret the necessary target language or who can accurately sign and read sign language. An Interpreter has the ability to translate names of body parts and to competently describe symptoms and injuries in both languages. Medical Interpreters have passed an appropriate certification.

B. **Proficiency Assessed Bilingual Staff:** Staff who have passed a language proficiency exam in a necessary target language. These staff can provide third party interpretation in low complexity situations within their scope of practice only.

C. **Bilingual Staff:** Staff who fluently speak a language other than English, but who have not passed a language proficiency exam

II. POLICY

UC Irvine Medical Center provides interpreting and translation services for non-English speaking or deaf/hard of hearing patients at the point of entry and throughout the patient’s stay. There is no charge to the patient for these services. Services are available 24/7. Translation services are available either in-person (Spanish and Vietnamese), via telephone vendor (all other languages), or via Video Remote Interpreting (ASL).

A. Adult (18 years or older) family members may not be used as interpreters except in emergent situations and when all other alternatives have been exhausted. Children may never be used as interpreters.

B. Patients will be assessed for primary language at each point of entry which is equipped with language charts to assist the patient in identifying their primary language. The patient's primary language will be documented in the patient’s medical record.

C. Bilingual staff may use their language skills to care for patients within their scope of practice. They may not be used as third party interpreters unless they have been assessed for proficiency (see Language Services Protocol).

D. On-site Spanish & Vietnamese medical interpreters may interpret/sign the Surgical/Procedural Consent Form only if they have been party to the original informed consent discussion. When the Medical interpreter is used for this consent discussion, the Interpreter must sign, date and time the consent form. If the Interpreter's role is limited to "verifying" the patient understands the informed consent, the Interpreter will document such.

E. If the patient or their legal representative’s language is not one for which a pre-printed consent form is available (e.g. Vietnamese), the care provider will use a telephonic interpreter and write the information (e.g. name of procedure, name of physician/s) on the English Surgical/Procedure consent form noting the Badge ID # of the telephonic interpreter used.

F. The use of an on-staff medical interpreter, including the interpreter’s name will be documented in the patient’s chart.

G. When a patient refuses to use an on-staff medical interpreter, document the reason and who interpreted at the patient’s request.
Medical Interpreters are available as follows:

- Spanish: Monday through Friday, 6:30 a.m. to 6 p.m.
- Vietnamese: Monday through Friday, 7 a.m. to 4:30 pm
- All other languages: 24/7 via interpreter phones ("blue" phones)
- American Sign Language: 24/7 via Video Remote Interpreting

To request translation services, see How to Request Medical Interpreters.