



**NCIHC Open Call
March 23, 2007**

1:30 pm PST (1:50 pm – 3:30 pm CST, 2:50 pm – 4:30 pm EST)

**Dual Role Interpreters:
Where do They Fit in a Language Access Program?**

The NCIHC Open Calls are held quarterly, as a means of encouraging exchange among professionals working in the field of language access and soliciting input from practitioners in the field to inform NCIHC policy making.

Participants: about 18 TOTAL
6 from the West
5 from the Mid-west
5 from the East Coast
2 Unknown

Introduction

The open call began with a short introduction. Cornelia E. Brown, from the NCIHC Outreach Committee, explained the background of the NCIHC open calls. She reviewed the mechanics of the call and then introduced this month's topic: **Dual-Role Interpreters: Where do they fit in a language access program?**

1. *Caveat:* NCIHC feels this topic is important because this is a live topic for many. Allowing for geographical differences, there are many dual-role interpreters "out there in the field;" less in some places and more in many others. There is ongoing controversy about the use of and managing of dual role interpreters. The Council is taking no formal position about whether dual-role interpreters are good or bad but rather is seeking to open a debate. It is the Council's belief that national exchange of ideas is the best way to develop the field of medical interpreting.
2. Discuss definition of "dual role interpreter." Proposed definition: staff member in a health care facility whose primary responsibility is not medical interpreting who works part-time for the facility as a medical interpreter.
 - a. Note that the job of "dual role interpreter" has variable parameters,

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- i. May or may require language-skills testing
- ii. May or may not require medical interpreter training
- iii. May be filled by medical or non-medical staff
- iv. May or may not bring extra compensation

There is much controversy about what a “dual role interpreter” is and/or should be. There was also discussion of “dual role interpreter” vs. a bilingual employee vs. a trained interpreter and knowing the definitions.

Definition for “bilingual employee”: An individual whose primary role/function is something other than interpreting. This individual normally falls into this role by accident and is stronger in one language than the other. Many were in agreement that even though this individual might not be “good enough” to interpret they have a positive impact on their employer.

Definition for “dual role interpreter”: staff member in a health care facility whose primary responsibility **is not** medical interpreting but in addition to regular duties works for the facility as a medical interpreter. Many agreed this is the “ideal” definition even though today it is not what is always true. Ideally, a dual role interpreter should be by choice and not a must for someone, unless they are hired with that expectation. In addition, the individual must have **two** clearly defined job descriptions.

Definition for a “trained medical interpreter”: A trained interpreter providing other services in addition to interpreting (E.g. an interpreter who also serves as a patient representative).

In addition to the above someone mentioned hablamosguntos.com where there is a definition found that addresses all of the above. In addition, it also provides a definition of where we currently are with dual role interpreters and what is aspired.

- b. Do you agree with this description of how the term is used? Somewhat.

For all definitions it was agreed the following should be a requirement and not an option:

- Should require language skills testing
- Should require medical interpreter training
- Maybe filled by medical or non-medical staff
- Should bring extra compensation since this is an additional skill and an extra benefit to the healthcare facility.

3. Who on the call works in or knows of a facility w/ dual-role interpreters? What are the parameters for the job at this facility?
- Acculingual: Dual role interpreters
 - Current employee who passes a language skills test in addition to required medical and interpreter training
 - Lee Memorial Health System Fort Myers
 - Same as above but the whole evaluation has to be on the role of an interpreter
 - Temple University Health System in Philadelphia, PA
 - It took the hospital three years to develop process from beginning to end.
 - Requirements for dual role interpreters
 - Managers must approve/consent for employee to participate in training and to provide interpretation services.
 - Test for proficiency
 - 60 hours classroom interpreter training on company paid time
 - Must pass interpreters skills test
 - Must observe only until interpreter feels satisfied he/she is ready to interpret
 - Individuals receive a salary bonus
 - Every 12 months they must retest and receive training to remain credentialed. “If you don’t use it you lose it” meaning if they have not used their skill they have to go through whole process again and lose their right to act as a dual role interpreter.
 - Dual role interpreters where badge that identifies them as such
 - Dual role interpreters are supplemental and not replacement for staff interpreters
 - Phoenix Children’s Hospital:
 - The hospital has a similar program
 - Spanish bilingual assistant program that allows individuals to only work in their capacity and/or scope of work definition
 - Bilingual services: Allows individual to work with patients in both languages in their current role
 - Dual role interpreter: As originally defined (Someone who has a different role within the hospital but is trained to provide interpretation services)
 - Medical Interpreter: staff interpreter
 - The hospital also has a sticker process in which upon every encounter the individual must give the nurse, doctor, etc. a sticker to place on the patient’s chart. This allows the hospital to have a better charting system in addition to better quality control.

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4. What benefits is the facility gaining w/its dual-role interpreter program? What aspects of the program are working well?

- Many hire bilingual staff and train them to be “dual role interpreters” They are being pulled so often that it is:
 1. A wake-up call that interpreters are needed
 2. It’s doing away with the perception that it costs less to have “dual role interpreters”.
- There is a broader range of languages available.
- Compensation:
 - UCLA: Individuals who help (not within their current floor/department or job) get a \$5 meal ticket. It helps the hospital internally track/measure amount of calls and what languages are being requested.
- Temple University Health System in Philadelphia, PA
 - Dual role interpreters cannot assist for over 15 minutes
 - Dual role interpreters cannot assist on emotionally sensitive issues
 - Dual role interpreters cannot assist on sign/written translations

5. What challenges/ pitfalls are you observing in the dual-role interpreting program?

- Be careful it doesn’t compromise current job.
- How do you locate the qualified individuals?
- What to do if individual is called for 10 minutes and you end up leaving your other job for over 30 minutes. How to make sure one job is not being neglected because of the other.
 - Ill will is created because someone else has to do their job for them at some point
- Where does DR interpreter go to debrief or enhance their skills?
- At times DR interpreters tend to be more expensive
- How to establish boundaries and regulations? How do you make it comfortable for all parties?

6. Do dual-role interpreters have a place in a quality language-access program? And why?

- Yes there is definitely a place in quality language access program for dual role interpreters. However, many believe it’s a stage interpreters are going through and overtime as demand goes up for services “dual role interpreters” along with hospitals will advocate for interpreters.
- At this moment, no one knows if this is a positive or negative thing.

- Dual role interpreting might be good option for more difficult to find languages of lesser diffusion since it's definitely better to have an onsite interpreter than over the phone interpreter.
 - Individuals can also be trained in non-clinical roles such as financial, administrative, and other roles that are areas within their current scope of work.
7. If dual-role interpreters are used, what are the key steps in guaranteeing quality of the interpreting?
- Elevate perception that a dual role interpreter is someone who is trained and tested
 - Differentiate between **requesting** and **using** dual role interpreters. You should be requesting their services and not using them