NCIHC Open Call
March 18, 2005
9:30 – 11:00 PST

Topic:
Dissemination and Promotion of the National Code of Ethics

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 20

Introduction
The open call began with a short introduction. Cornelia Brown, from the NCIHC Advisory Committee, reviewed the mechanics of the call and then introduced this month's topic.

This month's call focused on the dissemination and promotion of the National Code of Ethics for Interpreters in Health Care. This national Code of Ethics was developed over the course of two years through a national consensus-building process including outreach, focus groups and an open survey. The finalized version of the Code was released last fall. The Council is now interested in disseminating the Code and encouraging its adoption. How should we best go about this task? The input from this call will be used by a sub-committee of the Membership and Outreach Committee to design a program to disseminate the Code of Ethics around the country.

Dr. Brown then introduced Cindy Roat, Chair of the Advisory Committee, who gave a background presentation.

Background for Code
The National Code of Ethics for Interpreters in Health Care was developed by the NCIHC over a two-year period (2002-2004), largely with funding from the DHHS Office of Minority Health (Guadalupe Pacheco, Program Officer). The following process was used to develop the Code:
1. Review of current Codes of Ethics for interpreters, both for medical and other venues.

2. Development of a draft Code of Ethics
3. Solicitation of public input through 9 focus groups around the country.
4. Revision of the draft Code based on focus group results
5. Solicitation of public input on the revised Code through a public survey, disseminated through interpreter associations, language agencies, hospitals and clinics around the country.
6. Revision and finalization of the Code based on the survey results.

The final version of the Code was completed in late summer 2004. The Council is now interested in systematically disseminating the Code and encouraging its widespread adoption.

How shall we disseminate / familiarize people with the Code
(Note: the ideas presented here came partially from the open call, and partially from a series of emails responding to a query to the NCIHC listserv.)

To whom should the NCIHC disseminate the National Code of Ethics?	How can the NCIHC best disseminate the Code to these people?
General	• Assure a direct link to the Code from key websites, such as Diversity Rx, www.lep.gov, and OCR sites (national and regional) • Make the Code easier to find on the NCIHC website • Could we use the media? Consult the ATA PR committee. • Provide a context for the code when we send it out – there may be less awareness that we think. • Include a full explanation of the benefits of adopting this new code, e.g. "It is more complete because....." in addition to a report that compares or contrasts it with other currently existing codes in use and the inclusion of some possible scenarios that this code addresses well that other codes do not. • Emphasize JCAHO focus on patient safety and culturally competent services. • A clear statement regarding how the Code can be adopted and how it can (or cannot) be used or changed should be prepared so that inquiries can be processed quickly. Maybe this info should be on the website.
Hospitals administration, specifically CEOs, Compliance Officers, and Ethics officers	• NAPH and CAPH to reach public hospitals, • Safety Net Institute • JCAHO • Newsletters, bulletins

To whom should the NCIHC disseminate the National Code of Ethics?	How can the NCIHC best disseminate the Code to these people?
	• State Medicaid programs that sub-contract with hospitals and clinics through managed care. • Hospital Associations • Use listserv to solicit names and addresses of the people to whom the Code should be sent.
Medical groups	• Medical Group Managers Association • State MGMAs • PAHCOM (Professional Association of Health Care Management
Departments of Health – State and County	
Departments of Labor and Industry	
Interpreter Training programs	• Create a training guide (see more below) • Create a web-based training on the Code
Professional interpreter associations, such as NAJIT, ATA, state orgs	• Conferences • Ask them to formally adopt the CoE • Present professional seminars through the ATA affiliates
Dual-role interpreters	
Refugee Advocacy organizations	
Organizations that serve the Deaf and Hard of Hearing	• State Commissions for the Deaf and Hard of Hearing
Telephonic interpreting agencies	• Make sure the code is required in contracts with agencies.
On-site interpreting agencies	• Advocate for hospitals and clinics to require the Code in their contracts with agencies.
Area Health Education Centers (AHECs)	

To whom should the NCIHC disseminate the National Code of Ethics?	How can the NCIHC best disseminate the Code to these people?
Providers	• Peer review journals for ALL allied health professions • Medical schools, nursing schools, etc. • Professional associations • Conferences of professional associations • State medical societies • Nursing associations

Adoption of Code

Do you use a particular Code of Ethics now? Why or why not? If not, would adopting a Code be useful? What steps would you go through in deciding whether to adopt this Code?

- How does the Code mesh with the MMIA, CHIA, and RID codes? The NCIHC should convene a meeting with these three organizations to discuss how these various codes can mesh. **This must be done before dissemination of the Code in MA and CA.**
- To encourage adoption, it will help to emphasize that:
    1. that this is a national code
    2. this Code was created with a great deal of national input
    3. this Code creates an overarching and portable standard.]
    4. This Code will ensure an ethical standard in practice, helping to make health care interpreting be taken seriously as a profession, and helping to enlighten novice interpreters about the nature of their work.
- To facilitate adoption, providing the following would be helpful:
    1. a training guide – something half-way between the one-page code and the 26-page document.
    2. a sample compliance pledge form.
    3. guidelines for stating if the Code as adopted was adapted in any way: "based on the NCIHC with the following amendments." (It was felt that some organizations might have tighter restrictions on accepting gifts or on the advocacy portion.)

Summary and conclusion

At 10:50, Cindy Roat summarized the ideas that had been shared on the call. It was suggested that the next call might be focused on sharing ethical dilemmas. That idea will be considered for the next call, to take place on Friday, June 3rd from 9:30 – 11:00 PST.