The Albuquerque SANE Collaborative is committed to providing access to its services to all persons regardless of their ability to speak English. “Limited Access Proficiency” is defined as the inability to speak, read, write or understand the English language at a level that permits the patient to fully understand the nature of the services they are receiving from SANE, ask for clarification of services or fully understand the types of services the patient is consenting to receive.

To ensure fully competent access to SANE services, all staff is instructed to abide by the following procedures:

- Each staff person will ensure that they understand the special needs of their patients and accommodate those needs when possible.
- Notice shall be provided to persons with Limited English Proficiency (LEP) of the right to access services and the right to use a trained interpreter.
- Competent interpreters shall be provided for LEP persons.
- All paperwork which requires the patient’s signature regarding expectations, rights and responsibilities and consent shall require an interpreter to explain the paperwork in detail or be available in a translated version.
- Callers should be assisted by the staff member that is best able to serve their needs. Callers should not receive services that are more limited or lower in scope than those available to callers who speak English.

COMPONENTS OF ALBUQUERQUE SANE’S LANGUAGE ACCESS POLICY

Notice
It will be the practice of the Albuquerque SANE Collaborative to provide language interpretation by Pacific Interpreters to any patients who are considered to be limited English proficient. The only other interpreters allowed to interpret for patients must be certified interpreters. In no instances should children, family members, friends or partners be allowed to interpret SANE services to patients.

Notices advising patients of options for utilizing interpreters will be clearly visible throughout the SANE medical unit.

Training
All staff will be trained annually in the use of interpreters for providing services to individuals considered LEP. In addition, staff will be trained annually in how to access and use the Pacific Interpreters Language Line. This training may be in the form of
conferences held locally, training provided at monthly staff meetings or by working collaboratively with on-site partners at the Albuquerque Family Advocacy Center.

**Interpreters and Translators**
Two options are available for providing interpreter services to patients of Albuquerque SANE.

1. Any local certified interpreter may be utilized to assist with the sexual assault examination. These interpreters should be familiar with medical terminology in order to ensure the patient is fully able to understand the services being provided and what services they are consenting to receive.
2. The Pacific Interpreters Language Line can be utilized 24 hours a day. These interpreters are certified and work primarily in the medical and social work fields of care.

As the Albuquerque SANE Collaborative seeks to do outreach with non-English speaking communities staff will ensure that individuals from the specific communities who are bilingual, participate in the presentations.

Translation of all SANE documents requiring patient signatures will be completed by competent translators and reviewed by individuals who are proficient in the specific language to ensure the translation is accurate.

**Printed Materials**
Albuquerque SANE has very few documents that are available in languages other than English. The primary language spoken by patients of SANE, other than English, is Spanish. Educational materials when purchased will be purchased in both English and Spanish versions. Materials that are translated will be translated into Spanish, until such time that a reasonable number of patients speaking other languages seek SANE services. When at least 10% of the SANE patients speak a similar language, such as Navajo, the appropriate documents will be translated into that language.

**Policy and Procedure**
Albuquerque SANE’s Language Access Plan will remain active and updated on a yearly basis. Copies of the plan will be provided to all existing staff. Copies of the plan will also be provided to all new staff at the time of their hire.

**TELEPHONE INTERPRETATION SERVICES**
All staff of the Albuquerque SANE Collaborative should be knowledgeable about the need to provide services to patients, and callers, in a manner that is competent and meaningful. To this end, each staff member of the Albuquerque SANE Collaborative should consistently use an interpreter in the following situations:

- When a caller speaks (or seems to speak) more English than she/he seems to understand.
- When a caller seems to understand more English than she/he seems to speak.
- When a caller requests an interpreter.
- When a caller is in crisis (language proficiency decreases in a crisis situation).
Staff will be trained to inform a caller that SANE has interpreter services available at no charge to the caller. Even if a caller refuses the interpreter at first, if during the call an interpreter is appropriate, inform the caller about the availability of interpreters more than once or simply solicit the services of the interpreter on behalf of the LEP individual eliminating the need for the caller to request these services.

**Pacific Interpreters Language Line**
Albuquerque SANE will utilize the services of Pacific Interpreters to ensure LEP persons are provided the most meaningful services possible. Staff will be trained annually with regards to accessing the language line. Currently, the Family Advocacy Center has granted blanket approval to on-site agencies to fund the language line and specific instructions describe how to access this service. **Instructions for using the language line are attached to the back of this document.** When the funding provided by the Albuquerque Family Advocacy Center is no longer available, Albuquerque SANE will identify other funding to support this critical patient service.

**Telephone Access for Persons who are Deaf, Hard of Hearing or Speech Disabled**
Currently the Rape Crisis Center of Central New Mexico has partnered with the NM Commission for Deaf and Hard of Hearing Persons to provide interpreter services for patients needing these interpreter services. In Albuquerque deaf interpreter services are available through the NM Abused Deaf and Hard of Hearing Advocacy Center or through the Community Outreach Program for the Deaf. These services can be provided in person or via the telephone.

**Equipment**
The interview rooms are equipped with conference phones that can be placed on speaker to utilize the language line. In Exam Room 2257 the telephone has been specially equipped to allow the nurse to utilize the language line and still use both hands to conduct the exam. Nurses will periodically be given refresher training on how to use the phone setup in that exam room.

**Implementation**
The Program Director of the Albuquerque SANE Collaborative will be primarily responsible for ensuring compliance with the Limited English Proficiency Plan. Notebooks describing how to use and access interpreter services will be put together and available for staff in patient use areas. These notebooks will be reviewed and revised annually and will be presented to staff annually at a monthly staff meeting.

Any questions regarding the LEP Plan should be directed to the Albuquerque SANE Collaborative Program Director.
Pacific Interpreters – Language Line

Background
1964 Title VI of the Civil Rights Act stated that individuals cannot be discriminated against on the basis of their national origin, among other things. Therefore, we cannot limit services to those who do not speak English. By not having interpreters, we effectively limit access to services.

2000 Executive Order signed by President Clinton. This Order required Federal Agencies who funded agencies to provide guidance to those agencies in issues related to limited English proficiency (LEP).

Cultural and Linguistic Access Standards (CLAS). These standards are available at www.leg.gov and define standards for ensuring appropriate access to individuals considered LEP. These include standards such as signage in patient care areas about access to services and evaluating the skill of individuals providing language access services.

Information
Pacific Interpreters was founded in 1992 by a hospital social worker in the Pacific Northwest. Currently the organization provides services primarily to healthcare and social services agencies.
- Call center is located in Portland, OR
- Interpreters handle 6000 calls/day on average
- 90% of the call are for Spanish interpreters
- Two off-site call centers
- 180 languages including Navajo are available. Building a roster for other native languages

Qualified Trained Interpreters
- Receive 20-60 hours of training including items such as building their language skills, consecutive interpreting and simultaneous interpreting, memory skills
- Pay attention to tone, the message, speak in the 1st person, can convey urgency, are transparent, interpret everything said in the room, including side conversations, transparent
- Are trained in a code of ethics. More information on the Code of Ethics can be learned at 222.nclhc.org. Pacific interpreters sign an oath committing to adhere to the Code.

Family and Friends who operate as interpreters on average make 30 mistakes per session when interpreting for family members. Pacific Interpreters call the practice of using family and friends “worst practice”.

Code of Ethics includes the following:
- Confidential – interpreter does not repeat, share, publish any information from the session. Any notes kept during the session are destroyed immediately following the session. 98% of the customers are healthcare. Phone calls are not recorded, although they may be monitored to evaluate the interpreter.
• Accurate and complete – the interpreter will interpret for the patient all side conversations. Anything said in the room.
• Impartial – the interpreters do not get involved in the interaction. Even though they may not agree with services being provided (religious beliefs for example) they do not offer personal opinions nor will they correct misinformation.
• Respect for all parties – they will not interject their own personal beliefs.
• Cultural Barriers – rarely an interpreter will stop a session if they determine there are cultural barriers to the patient understanding. They will explain this to both parties and share information. The interpreters are trained in cultural differences and will do “cultural brokering.”
Using Pacific Interpreters Language Line

Effective immediately Albuquerque SANE will use the Pacific Interpreters anytime there is a patient who you believe will be better served by using an interpreter. Please do not count on the advocate or family members to interpret on your behalf. Call!!!

Procedure:
- Determine what language the patient speaks. This can be done using the card provided by Pacific Interpreters (PI).
- Call the phone number listed on the materials posted in the interview room and exam room
- Phone will be answered by live operator who will ask for
  - Our access code (found on the materials in the interview room and exam room)
  - The language needed
  - Whether this is DV or SA. We would always be SA
- The operator will put you on hold while they locate an interpreter. Their average response time is 28 seconds.
- You will be transferred to the interpreter who will give you their ID#. Record this ID# in the patient’s medical record.
- Give interpreter brief background: what organization, your name, anticipated length of call
  - At this point you can tell the interpreter that there will probably be 3 separate calls. Because of the high cost of using the language line, we do not want to put the interpreter on hold if there will be more than a 2-3 minute delay in needing their services.
- At conclusion of the session, there is a data sheet that needs to be filled out. Plan to ask the interpreter to assist you with the data sheet.
- If during the session, you do not feel like the interpreter is working for your situation, then you can disconnect with the interpreter, call back and ask for a new interpreter. You do not need to start over with the new interpreter.
  - If there is a problem that you believe should be reported, then send Teresa an e-mail which includes: the interpreter ID#, time and date of call and what the problem was.
  - Pacific interpreters would like to hear both positive and negative feedback. They are very dependent on user feedback to evaluate their interpreters.

Things to remember during the exam when using an interpreter:
- Speak to the patient as though he/she spoke English. Pause frequently for the interpreter. The recommendation is that you pause for every complete thought.
- Make eye contact with the patient - not with the phone.
- Do not use jargon, slang or acronyms. These could be misinterpreted by the interpreter and could also slow your exam down while the interpreter asks for clarification.
- Understand that using an interpreter will extend the length of the patient’s exam.
- The interpreter will use the same language level in the interpretation that you use.
- Patients would likely appreciate being asked whether they prefer a same sex interpreter. We can request a same sex interpreter, although it is not guaranteed.

- PI can be used when making phone calls also. Get details on how to do this from Irene or Teresa.