**Interpreter Services Program**

**What is the Interpreter Services program?**

According to [**Title VI of the Civil Rights Act of 1964**](https://www.justice.gov/crt/fcs/TitleVI-Overview), it is the health care practitioner's legal and financial responsibility to establish meaningful communication with their patients. Medical providers registered in the Health Care Authority’s (HCA) ProviderOne system may receive interpreter services support at no cost **only** if a client is eligible for Medicaid covered services at the time of the appointment. **A medical interpreter is a skilled professional** - bound by a code of ethics - who facilitates provider-patient communication. Interpreters are independent contractors covered by a union contract between the State of Washington and WFSE/AFSCME Council 28. To read this full agreement visit [Office of Financial Management](http://www.ofm.wa.gov/labor/agreements/) (OFM).

**How do I schedule an interpreter?**

HCA contracts with CTS LanguageLink to schedule interpreters. Scheduling is done through an online portal that interpreters also use to accept available appointments. Visit [CTS LanguageLink](http://hca.ctslanguagelink.com/)to create an account and schedule an interpreter. For more information, review the [providers FAQ](http://hca.ctslanguagelink.com/landing-page/providers/existing-providers/provider-faqs/) or 1-800-535-7358. Interpretation is available by telephone, video remote interpretation (VRI) or in person. To learn more about selecting the method of interpreting, visit [HCA Interpreter Services](http://hca.ctslanguagelink.com/landing-page/providers/existing-providers/provider-faqs/) for your interpreting needs.

**Importance of logging the Interpreter’s actual check in/checkout time correctly.**

Toavoid issues that may arise with billing, it is important to keep precise records of the interpreter’s actual check in and checkout times. This will help avoid any confusion and ensure the interpreters are paid for their time of service

**Resources**

WA Department of Social and Health Services Language [Interpreter and Translator Code of Professional Conduct](https://www.dshs.wa.gov/fsa/language-testing-and-certification-program/code-ethics)

[National Standards on Culturally and Linguistically Appropriate Services (CLAS)](https://minorityhealth.hhs.gov/assets/pdf/checked/finalreport.pdf)

Created in collaboration with WFSE/AFSCME Council 28 and Health Care Authority (HCA).

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# How to work with an interpreter

* **Please wait for the interpreter** you requested before starting the appointment, unless they are late.
* **Expect the interpreter to leave the room when a provider is not present.**
* During the visit, **look and speak directly to the patient**, not the interpreter. Sit where the Interpreter can see both you and the patient.
* **Always speak in first person**, just as you would in normal conversation. For example, say, “Do you have a fever?” rather than “Ask her if she has a fever, please.” After you speak 1 or 2 sentences or finish a thought, **pause** to give the interpreter enough time to interpret to the client.
* Some terminology and concepts may not have an equivalent in the target language. **Be prepared to explain some things in more detail** for the interpreter, or the interpreter may ask for clarification. If they do, they will refer to themselves as “the interpreter.”
* Avoid asking the interpreter for his/her opinion or having conversations with the Interpreter on the side. Interpreter is there as a communication source for you and the client.
* If you have forms not translated into the target language, you should be asking the questions to the client with the interpreter relaying information between client and provider.
* Interpreter’s **may use a dictionary** or take notes.

**For additional tips visit** [**www.ctslanguagelink.com/onsite\_tips.php**](http://www.ctslanguagelink.com/onsite_tips.php)