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**Service Category Definition - DSHS State Services Grant
September 1, 2016 - August 31, 2017**

Local Service Category:	Linguistics Services
Amount Available:	To be determined
Unit Cost:	
Budget Requirements or Restrictions (TRG Only):	Maximum of 10% of budget for Administrative Cost.
DSHS Service Category Definition	<p>Support for Linguistic Services includes interpretation (oral) and translation (written) services, provided by qualified individuals as a component of HIV service delivery between the provider and the client, when such services are necessary to facilitate communication between the provider and client and/or support delivery of Ryan White-eligible services.</p> <p>Linguistic Services include interpretation/translation services provided by qualified interpreters to HIV-positive individuals (including those who are deaf/hard of hearing and non-English speaking individuals) for the purpose of ensuring communication between client and providers while accessing medical and Ryan White fundable support services that have a direct impact on primary medical care. These standards ensure that language is not barrier to any client seeking HIV related medical care and support; and linguistic services are provided in a culturally appropriate manner.</p> <p>Services are intended to be inclusive of all cultures and sub-cultures and not limited to any particular population group or sets of groups. They are especially designed to assure that the needs of racial, ethnic, and linguistic populations severely impacted by the HIV epidemic receive quality, unbiased services.</p>
Local Service Category Definition:	To provide one hour of interpreter services including, but not limited to, sign language for deaf and /or hard of hearing and native language interpretation for monolingual HIV positive clients.
Target Population (age, gender, geographic, race, ethnicity, etc.):	HIV/AIDS-infected individuals living within the Houston HIV Service Delivery Area (HSDA).
Services to be Provided:	Services include language translation and signing for deaf and/or hearing impaired HIV+ persons. Services exclude Spanish Translation Services.
Service Unit Definition(s) (TRG Only):	A unit of service is defined as one hour of interpreter services to an eligible client.
Financial Eligibility:	Income at or below 300% Federal Poverty Guidelines.
Client Eligibility:	HIV positive resident of Houston HSDA
Agency Requirements (TRG Only):	Any qualified and interested agency may apply and subcontract actual interpretation services out to various other qualifying agencies.
Staff Requirements:	ASL interpreters must be certified. Language interpreters must have completed a forty (40) hour community interpreter training course approved by the DSHS.
Special Requirements (TRG Only):	Must comply with the Houston EMA/HSDA Standards of Care. The agency must comply with the DSHS Linguistic Services Standards of Care . The agency must have policies and procedures in place that comply with the standards <i>prior</i> to delivery of the service.

**Service Category Definition - DSHS State Services Grant
September 1, 2016 - August 31, 2017**

FY 2018 RWPC "How to Best Meet the Need" Decision Process

Step in Process: Council		Date: 06/08/17
Recommendations:	Approved: Y_____ No: _____ Approved With Changes:_____	If approved with changes list changes below:
1.		
2.		
3.		
Step in Process: Steering Committee		Date: 06/01/17
Recommendations:	Approved: Y_____ No: _____ Approved With Changes:_____	If approved with changes list changes below:
1.		
2.		
3.		
Step in Process: Quality Assurance Committee		Date: 05/18/17
Recommendations:	Approved: Y_____ No: _____ Approved With Changes:_____	If approved with changes list changes below:
1.		
2.		
3.		
Step in Process: HTBMTN Workgroup		Date: 04/25/17
Recommendations:	Financial Eligibility:	
1.		
2.		
3.		

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Lost in Translation. Language Barriers Pose Hurdle to Doctor & Patients

Article By:

Jonathan Rosenfeld

When lives are at stake, doctors cannot afford to be given a poor translation when attempting to understand what is going on with his or her patient and family members cannot misinterpret the instructions given to them. The quality of a patient's life and his or her prognosis can be greatly diminished simply because there was a language barrier and this is why there needs to be a greater investment in interpreters by hospitals. Rather than hire these individuals, many healthcare providers have opted for less expensive and impersonal options that have proven to be highly ineffective and jeopardized the health of many.

Minor Misinterpretations Can Result in Major Medical Errors

One stark example of the devastation that can result from poor translation in a hospital setting comes from a baseball player who was severely injured when a medical interpreter mistranslated a single word used by his family to describe his condition. In the Spanish language, "intoxicado" means digestive irritation, but it was translated to mean "intoxicated" by the interpreter working with Willie Ramirez in 1980.

The message was relayed to the doctor that he was suffering from a drug overdose and the doctor did not notice the hemorrhaging in Ramirez's brain until it was too late to prevent massive trauma which rendered him paralyzed from the neck down. As more hospitals seek less expensive alternatives to hiring in house translators, the problem is getting worse.

Use of Phone Service makes it Even More Difficult to Break Language Barriers

Despite the requirement that hospitals hire professional translators, some have moved to depend on phone services that allow doctors and nurses to gain access to a translator where needed. The problem is that these translators are not able to see what is happening at the moment, some patients with hearing problems are unable to understand the person on the other end and it is difficult for patients or translators to relay messages without being there.

There is also a severe shortage of qualified interpreters, which is a reason hospitals are turning to phone services for their needs. A study revealed that in the state of Oregon, only 100 out of 3,500 interpreters had the right qualifications to work with patients in healthcare settings. The error rate for an unqualified interpreter can be up to 22% compared with 2% for interpreters with more than 100 hours of training.

There is only a 3% chance that Oregonians will receive a qualified interpreter, however.

Family Members Often Make Translation Errors Themselves

There are many instances where an English speaking relative of the patient may attempt to translate a doctor's

instructions or communicate the needs of the patient. Many of these translators are young children, however, and may not understand the instructions fully themselves to begin with. The only solution is to rely on the skills of a well-trained interpreter who can communicate with patients face to face.

- <http://www.nejm.org/doi/full/10.1056/NEJMp058316#t=article>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1448350/>
- <https://www.ahrq.gov/professionals/education/curriculum-tools/shareddecisionmaking/tools/tool-3/index.html>

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Medical interpreters bridge important gap Services becoming more crucial in Houston area



Medical Interpreter Sign

Houston is an international city, with a diverse population and those who are visiting daily, but most of all, people come from around the globe to seek care at the Texas Medical Center, one of the largest and most prestigious medical centers in the world.

Due to this, medical interpreting is becoming more vital and important as hospitals and doctors in Houston, and Texas, are seeing more international clients. And doctors want to ensure the quality and professionalism of the interpreting services they must provide patients, according to **Valerie S. Mayer**, CMI- Spanish interpreter and translator, IMIA Texas Chapter.

The growing international clientele is creating jobs as well, as hospitals in all areas of the city and surrounding areas are finding an increasing need for interpreters, which includes Texas Children's.

"**Texas Children's Hospital** hires interpreters for our three campuses, the West Campus in Katy, Main Campus at the Texas Medical Center and Texas Children's Pavilion for Women," Mayer said.

At Houston Methodist and Texas Children's, Spanish is the most requested language, followed by Arabic, Vietnamese, Chinese and Urdu.

"We also receive requests for less common languages like Burmese, German, Italian, French, Portuguese, Japanese or Nepali, and sign language," Mayer said.

Working as an interpreter is a full-time position.

"Hospitals also fill the need with contract interpreters when needed," said **David L. Marshall**, spokesperson, **Global Healthcare Services Group, Houston Methodist Hospital**.

Texas Children's has full- and part-time interpreters who cover the different areas of the hospital and clinics 24/7. There are many shifts.

"We also provide phone and video relay interpretation services if a face-to-face interpreter is not available," Mayer said.

According to Marshall, interpreters are required to have a bachelor's degree or five years of related experience.

Individuals interested in being an interpreter at Texas Children's, though, must have at least two years of experience as a medical interpreter.

The applicant's evaluation is extensive. Beyond the regular screening process, the department gives a test to assess the abilities and skills of interpretation that combine fluency in both languages (English and the second language), vocabulary knowledge, terminology, memory, note techniques, HIPAA law knowledge, understanding of the Civil Rights Act of 1964, and ethics in the profession, according to Mayer.

"At this time, we do not require our interpreters to be certified medical translators, but this may be changing," Marshall said.

Texas Children's **Language Services Department** has the goal of having all interpreters certified nationally through the **National Board of Certification for Medical Interpreters** and the **Certification Commission for Healthcare Interpreters** by 2015.

Interpreters also work on document translations such as discharge documents, medication information, handouts and others.

"Besides the face-to-face interpreters, the hospital is equipped with video interpreter units, and double-handset telephones for direct access to interpreters at the rooms, main areas of the hospital, and clinics," Mayer said.

In checking numerous job boards for interpreters, numerous languages interpreters are in demand, from Spanish to Cantonese.

Further details

For Texas Children's, visit www.texaschildrens.org. For Houston Methodist, go to www.houstonmethodist.org.

By Rebecca Maitland, jobs correspondent

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Accessible Translation Solutions

BY ACCESSIBLETRANSLATIO | JANUARY 18, 2013 · 11:41 AM

Medical Translation and Interpreting: Saving Money, Saving Lives

Some professions can be very competitive and those who don't perform the same type of job duties may not understand why. Sometimes I think, "Why are these people being so competitive and cut-throat with their colleagues? It's not like they're saving lives!" However, in the field of medical translation and interpreting, we can say that yes, linguists often might be saving lives. Here are two examples of how medical translators and interpreters can save clients money while their work can save lives:

The first example is found in an article posted in January 2009 in [American Medical News](#) from the [American Medical Association](#). This case involved a New Jersey rheumatologist who refused to provide a sign language interpreter for a patient being treated for lupus. This patient consistently requested an interpreter, but claims that her requests were always denied. The physician's argument was that Medicare did not reimburse the entire cost of an interpreter for each visit. Instead, he passed written notes back and forth to the patient and her family.

Apparently, this was not enough for the patient to feel as though she understood what was happening at the medical visits and she transferred to another doctor.

The patient sued the original physician, claiming violation of the federal Americans with Disabilities Act and the Rehabilitation Act, along with New Jersey's anti-discrimination law. The jury found the rheumatologist had indeed discriminated against the patient when failing to provide a sign language interpreter.

If a medical interpreter had been present at the child's visits with the rheumatologist, she might have felt differently about the care she received and would not have sued the physician, which will likely cost him more than an interpreter would have.

Then there is the story of Lia Lee, a child raised in California of Hmong refugees and the focus of Anne Fadiman's book, [The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures](#). Lia was misdiagnosed twice as having had pneumonia, when in reality, she was epileptic from the time she was an infant. Lia's parents did not speak English well enough to communicate with the doctors who treated her, and they often misunderstood how to care for her at home. They did not know how to describe the child's seizures effectively to her physicians, as in their own culture, these episodes seemed to convey that her body was being overtaken by a spirit.

Misunderstandings continued between Lia's parents and her physicians, as both sides were unable to communicate effectively and understand each other's cultures. A New York Times article reported, "The seizures worsened; by the time Lia was 4 ½, she had made more than 100 outpatient visits to medical facilities and been admitted to the hospital 17 times. When she was not quite 3, in frustration at what he viewed as her parents' refusal to administer her medication, Dr. Ernst (Lia's physician) had Lia legally removed from the family home." Lia was sent to live in foster care for one year, yet another blow to her parents. Her health worsened and

the relationships between her parents and her physicians were strained, as neither side seemed to adequately comprehend the culture and language of the other. Lia died on August 31, 2012.

A medical interpreter at Lia's visits and proper translation of her prescriptions and care instructions could have allowed Lia to receive consistent and proper care for her condition, likely avoiding her placement in foster care. Needless to say, such services would have greatly improved her quality of life.

These are only two of the stories about how medical translation and interpretation can save lives and reduce costs by avoiding unnecessary tests, misdiagnoses, treatment errors and miscommunication. To ensure compliance with federal regulations as a health care provider, be sure to request [professional interpretation and translation](#) for patients and their families. It truly can save you money and continue to save lives.