

## **Rules and Regulations For Licensing of Hospitals**

### *Section 20.0 provision of interpreter services.*

20.1 Every hospital shall, as a condition of initial or continued licensure, provide a qualified interpreter, if an appropriate bilingual clinician is not available to translate, in connection with all services provided to every non-English speaker who is a patient or seeks appropriate care and treatment and is not accompanied or represented by an appropriate qualified interpreter or a qualified sign language interpreter who has attained at least sixteen (16) years old of age.

20.2 No later than 1 July 2002, each hospital shall develop, establish and maintain a formal plan for the provision of language interpretation with respect to provision of hospital services in all licensed setting.

20.1.2 Each hospital shall establish criteria for the qualification of interpreters. In addition to fluency in a language other than English, interpreters shall have demonstrated competency in the following topics, at a minimum: (i) the appropriate role of a medical interpreter; (ii) the confidentiality of health care information; (iii) the ethical issues involved in serving as a medical interpreter; (iv) common medical terminology; and (v) relevant hospital policies and procedures.

20.2.2 Each hospital shall review the qualifications of and designate individuals as interpreters in specific languages. Such reviews and designations shall be documented.

20.2.3 Each hospital shall establish criteria for the qualification of bilingual clinicians. In addition to being bilingual, clinicians shall have knowledge of the following topics: (i) the appropriate role of a medical interpreter; (ii) the ethical issues involved in serving as a medical interpreter; (iii) common medical terminology; and (iv) relevant hospital policies and procedures.

20.2.4 Each hospital, for the purpose of providing interpretive services, shall review the qualifications of and designate clinicians as bilingual in specific languages. Such reviews and designations shall be documented.

20.2.5 Each hospital may also contract with appropriate off-site interpreter service. Providers for the provision of qualified interpreter services provided that hospital has received the prior written approval of such arrangements from state agency.

20.3 Each hospital shall post a multi-lingual notice in conspicuous places setting forth the requirements of section 20.1 Above in English, include the internationally-organized symbol for sign language {including number for access by hearing/speech impaired (TTY)} and include, at minimum, three (3) most common foreign languages used by the hospital as determined by the hospital.

27.7 the content of all medical records (inpatient, outpatient, ambulatory and emergency) shall conform with applicable standards of reference 9. further, medical records shall document the primary language of the patient; shall document any hospital provision of interpretive services by bilingual clinicians, qualified interpreters, or qualified sign language interpreter; and shall document the inability to provide interpretive services by bilingual clinicians, qualified interpreters, or qualified sign language interpreters as required by the patient.