

## **Guidelines for Working with American Sign Language Interpreters In Mental Health Settings**

### **Choosing or Scheduling an Interpreter**

1. Request an interpreter as soon as the appointment is scheduled. Depending on your location, interpreters may need to travel long distances. In emergency situations, call the closest Interpreter Referral Agency in your area with 24 hour coverage.
2. In choosing an interpreter for regular assignments, you can either use freelance individuals or go through a referral agency. Individuals usually charge less, but you will need to do more work in calling and finding the interpreter and/or finding a replacement if s/he cancels. Referral agencies also often know the Deaf consumers in an area and can match interpreters with the client's communication needs. Please refer to the list below for Kentucky's Interpreter Referral Agencies:

Northern Kentucky Services for the Deaf  
19 W. Pike Street  
Covington, KY 41011  
(859) 372-5255  
After Hours: (859) 371-4844

Center for Accessible Living  
305 W. Broadway, Ste 200  
Louisville, KY 40202  
(502) 589-6620

Owensboro Resource Center  
for the Deaf and Hard of Hearing  
3219 Meadowland Drive  
Owensboro, KY 42303  
(270) 903-1050 voice/text  
[ORCDHH@yahoo.com](mailto:ORCDHH@yahoo.com)

Central Kentucky Interpreters  
525 Silver Brook Road  
Danville, KY 40422  
(859) 236-9888

Community Services for the Deaf  
(serving Northern KY)  
Hearing, Speech, and Deaf Center  
2825 Burnett Ave.  
Cincinnati, OH 45219  
(513) 221-0527 (V)  
(513) 221-1703 (Fax)

Community Services for the Deaf  
(Serving Ashland & Eastern KY)  
902 Washington Street  
Portsmouth, OH 45622  
(740) 356-7200 (V)

League for the Hard of Hearing  
(Serving South Central KY)  
145 4<sup>th</sup> Ave.  
Nashville, TN 37201  
(615) 248-8828

Rauch Interpreting Services  
1200 Bono Road  
New Albany, IN 47150  
(812) 944-6464

Barren River Resource Center for the  
Deaf and Hard of Hearing  
24 hour Interpreter Referral  
Bowling Green, KY  
(270) 320-0974

A list of freelance interpreters can be obtained on the following website:

[www.kcdhh.ky.gov](http://www.kcdhh.ky.gov) under “Access Center”

3. If you have several Deaf clients, it may be wise to schedule blocks of interpreter time. This will reduce the cost of portal / travel and avoid minimum charges (See Below). This can be especially effective with psychiatry appointments and when clients receive multiple services in one day.
4. When scheduling an interpreter, provide as much information as possible about the setting and situation. Providing names of consumers and the details of the assignment is part of getting a good match between a consumer and interpreter.
5. Some individuals in the Deaf community have preferred interpreters and those they do not like to work with; it is polite to ask them.
6. If interpreters are used for ongoing services, it is better to have the same interpreter for consistency and trust building. You may be able to contract individually for this kind of service.

### **Quality Assurance**

1. Kentucky has a **licensure** law. See <http://finance.ky.gov/ourcabinet/caboff/OAS/op/interpret>. Essentially, all paid interpreters must have a KY license. This ensures a minimum level of competence and ongoing education through a CEU process. When seeing an interpreter for the first time, ask for her/his license and keep a copy somewhere in the office. Licenses are renewed annually.
2. Interpreters are bound by their own professional Code of Conduct. Some agencies also prefer to keep Non-Employee **Confidentiality** Agreements on file with copies of licenses.
3. **Family members or friends should NOT be used as interpreters.** Most family members are not fluent in American Sign Language and there may be clinical conflicts of interest between the client and family member. In rare instances, individuals with Minimal Language Skills or idiosyncratic sign may need a person who knows them well to provide context in addition to the interpretation of the provider. Certified Deaf Interpreters can also be employed for those considered Deaf at Risk (Deaf with a disability, mental illness, minimal language, etc).
4. Professional interpreters with the highest levels of skill are also **certified** through national testing. You may see business cards with CI, CT, or both. You can go to [www.rid.org](http://www.rid.org) to see the Registry of Interpreters for the Deaf Professional Code of Conduct and explanation of certification levels.

5. In addition to being licensed, interpreters must be **qualified** for the setting in which they work. This means that s/he should have had some exposure to the terminology and specialized demands of mental health work prior to working with you and your consumer. (QUALIFIED DEFINITION OR REG?)
6. All day or intensive assignments may require a team of two interpreters. This is to ensure accuracy of interpreting and of the health and safety of the interpreter.

### **Rates and Payment**

1. Current (2008) rates for interpreters in Kentucky average \$40 /hour for certified and \$30 / hour for non-certified interpreters. Assignments after 5:00 p.m. or on weekends usually have an upcharge of \$5 /hour.
2. Since interpreters work job to job, paying **either** portal (time to drive to assignment) **or** mileage is typical. Some interpreters will demand both. Rates should be negotiated before the assignment is confirmed.
3. Some interpreters and referral agencies have a minimum length of assignment, typically two hours.
4. In case of cancellation, most agencies and interpreters will still charge the time booked if cancellation occurs less than 24 to 48 hours out. If the cancellation occurs when the interpreter is in route, portal will also be charged.
5. In case of No Show, the full rate of time booked and portal is typically charged.
6. Interpreter coordinating agencies and freelancers are beginning to get more in writing prior to assignments. They may ask the agency to complete a form with their rules and “fax back” before confirming an assignment. Your agency may also choose to have written documents explaining billing rates, confidentiality, policies, etc. This can be protection from interpreters billing beyond agreed upon time limits or rates.
7. Invoices are generally mailed from interpreters and agencies at least monthly. If bills are not paid in a timely manner, the number of interpreters willing to work at your agency will reduce.

### **DMH Assistance**

1. The Division of Mental Health, Developmental Disability, and Addiction Services has a limited amount of money each year to reimburse Community Mental Health Centers for interpreting costs. The funds are designated as mental health, mental retardation / developmental disabilities, and substance abuse.
2. First, pay the interpreting bill.
3. Send a copy of the bill, cut check, and original

KDMHMRS

Deaf or Hard of Hearing Reimbursement

COMMUNITY MENTAL HEALTH CENTER  
ENHANCED SERVICE ACCESS  
FOR PERSONS WHO ARE DEAF OR HARD OF HEARING  
form to the Deaf Services Program Coordinator:

Sara Garner  
100 Fair Oaks Lane, 4E-D  
Frankfort, KY 46021

4. Bills will be paid through Bluegrass, the fiscal agent for the project.
5. It is therefore recommended that, if you pay mileage, rates reflect those of Bluegrass' current reimbursement. Higher rates may not be reimbursed.
6. Agencies can expect a three to four week turnaround time for interpreter reimbursement. Bill submitted for June assignments must be processed as soon as possible in July or may not be covered.
7. In the event that funds run out, the Program Coordinator will inform each Community Mental Health Center. Each Center will then be asked to track the amount of funds spent and not reimbursed in order to account for unmet needs in the state.
8. The Division can provide recommendations regarding interpreting and answer questions. Contact the Program Administrator, Michelle Niehaus, at (502) 564-4456 x 4521 or Program Coordinator, Sara Garner, at x 4507.
9. The Division offers ongoing educational programs for both interpreters and mental health professionals. Contact us to receive updates and information.

### **Etiquette**

1. Interpreters are professionals and should act, dress, and be treated as such.
2. The individual who is Deaf should have the final decision in setting up the room. Lighting, vision, and other factors can play a role.
3. Typically, in an individual session or doctor's appointment, the interpreter will sit next to and slightly behind the mental health professional.
4. In group settings, the interpreter may sit or stand and may be mobile or stationary. This will probably be discussed between the consumer and interpreter.
5. Speak directly to and look at the individual who is deaf. There is no need to say "Ask him" or "Tell her."
6. In group, it is advisable to remind participants that interpreters also follow confidentiality rules. Establishing turn-taking is essential so that the interpreter can keep up. Pacing should be monitored to be sure that the deaf individual can participate.
7. If written materials are used, provide copies to the interpreter before the meeting if possible. Remember that any time the consumer is looking down at paper or up at a screen, s/he cannot see the interpreter. Multi-tasking is not easy!

### **Treatment Considerations**

1. Working through an interpreter may take longer. Allow for this.

2. Document in the medical record that a licensed interpreter was used in the session.
3. The interpreter is a communication and cultural specialist. S/he is not responsible for monitoring or taking care of a consumer. Do not put him/her in a compromising position.
4. The interpreter is an integral part of the treatment team. Conduct a pre-session to discuss what is anticipated and provide any technical jargon, vocabulary, or background you can to offer context. You can also ask general questions about Deaf culture or communication at this time.
5. During the session, speak in a normal pace, tone, and volume. The interpreter will stop you if necessary for clarification. Avoid acronyms.
6. You may also choose to do a post-session to debrief any intense moments, ask questions on clarification and comprehension, or plan for the next session.
7. If treatment is ongoing, it is advisable to use the same interpreter(s) throughout.
8. Consider inviting the interpreter to the Treatment Planning Team meetings to provide insight on Deaf culture and communication.
9. Even though the interpreter may know the consumer from other situations, s/he cannot provide information on that. S/he may be able to give general information such as whether communication was typical for that person that day or compromised.
10. In an inpatient or Intensive Outpatient Setting, a team of interpreters may cover different shifts. A Communication Log can be used and kept in the chart or nurse's station to allow interpreters to transition and communicate with one another.

Revised 6/29/09