Interpreting and Informed Consent

Informed consent is a communicative process between a patient and health care provider (HCP) in which treatment explanations are provided and risks associate with such treatments are explained. This process allows opportunity for a patient to ask questions. It culminates with the patient signing a Health Authority consent form that states he/she is informed and understands the treatment and risks. Obtaining informed consent is an ethical and legal obligation.

According to the Health Care Consent Act (HCCA), the 4 legal requirements for Informed Consent are that:

- Patient must be capable
- Consent must be voluntary
- Consent must be informed
- Consent must be treatment specific

Lack of Informed Consent in clinical practice can cause:

- Health events with adverse effects
- Extends the length of hospital stay
- Inappropriate use of testing
- Unauthorized procedures such as surgeries

**Professional Interpreters**

For patients with limited English proficiency informed consent in a clinic setting can only be gained with the use of an interpreter. Translating a consent form, although helpful at one level, does not address the interchange that needs to take place between patient and HCP.

Ethical implications of not obtaining informed consent (due to language barrier) are:

- Lack of patient autonomy
- Patient right to privacy and confidentiality disregarded
- Justice and fairness—equitable access to health care resources denied
- Quality of patient care compromised
- Alignment with organizations values, missions, visions forgotten
The role of an interpreter in this process is to faithfully interpret the communication exchanged between the HCP and the patient. The role of the interpreter is not to administer or oversee informed consent; nor is it to ensure the patient fully comprehends the treatment or risk. The interpreter’s role is simply to facilitate the message using appropriate linguistic equivalencies in both languages.

**In order to avoid legal implications and lower risk:**

- Recognize the importance of informed consent when dealing with language barriers
- Make sure you use a professional interpreter for LEP (Limited English Proficiency) patients
- Do not compromise the quality of health care outcomes by using family, friends or other health care staff when obtaining informed consent
- Standardized the interpreter declaration within the informed consent (ie. a check box that indicates an interpreter was used or a statement such as I, (interpreter name) interpreted the information faithfully and accurately.

**Consent Documents**

- **should not state that the interpreter translated** the information
  - Translation refers to written rendering of a language.
- **should not be sight translated** by the interpreter
  - Sight translation I s the oral rendering of written text from one language into another
- **should be interpreted** which implies that in addition to the interpreter, the HCP and patient are involved
  - As stated above informed consent in completed by a HCP with the assistance of an interpreter
- **should not** include a section in which the interpreter **indicated the patient understood** the information given as interpreters canon attest to whether the patient understood
  - An interpreter can only attest that the interpreting was delivered faithfully and that the use of vocabulary, language structure, syntax, etc. when going from source to target language was appropriate
- **should** include a section that **indicates an interpreter was used**

References:
- [http://healthcare.partners.org/phsirb/nonengco.htm](http://healthcare.partners.org/phsirb/nonengco.htm)
- [http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2078548/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2078548/)