Oregon State Legislature 900 Court St NE Salem, OR 97301

SUBJECT: Support for HB 2696, the Oregon Sign Language Interpreter Licensure Bill

To Chair Nosse, Vice-Chair Goodwin, Vice-Chair Nelson, and members of the Committee:

I am writing to urge this Committee to support HB 2696.

My name is Erin Trimble and I am a sign language interpreter who resides in Oregon.

This Bill protects the Deaf, DeafBlind, and Hard of Hearing communities by establishing a licensure requirement for sign language interpreters. Currently in Oregon, anyone can legally represent themselves as a sign language interpreter whether or not they are qualified and provide services in settings such as emergency press-conferences, drug treatment facilities, or attorney-client meetings. This results in unqualified or unethical interpreting services, violating the rights of Deaf, Deafblind, and Hard of Hearing Oregonians and potentially causing great harm to consumers. Along with the risk to the consumers, hiring entities such as government agencies are at risk of lawsuits if they hire interpreters who are unqualified. Licensure will establish standards for the profession, as well as protect consumers and hiring entities by requiring licensure to work as a sign language interpreter in Oregon. Over 30 states have established such requirements for sign language interpreters and the passing of this bill would ensure Oregon is in line with national best practices.

I have been a sign language interpreter for 19 years, and 16 of those years have been in Central Oregon. I hold a Masters of Arts in Interpreting Studies, a Bachelor of Science in American Sign Language/English Interpreting, as well as national certifications (Certificate of Transliteration, and an Educational Interpreter Performance Assessment). Over and over and over again throughout my time in Central Oregon I have had members of the Deaf community relate horror stories of their recent experiences with unethical and unqualified signers showing up to interpret for their medical visits and procedures. As one of the few nationally certified interpreters in Central Oregon, I get called in when things go poorly. One such time was when a Deaf individual was assaulted, and later went to the ER to receive treatment and the "interpreter" called in could not understand the Deaf person's signing. Consequently, the Deaf individual had to make an additional appointment with the police department to give their victim statement again, with me there to interpret. This person not only had to experience the

trauma of the assault and the subsequent need for medical treatment, they had to relive that trauma TWICE because the first interpreter could not understand their signing.

Another, more recent example from the last year: A different Deaf individual had been seeking physical therapy treatment for an injury. Minimal progress had been made for the first three months. I happened to fill in for the regularly scheduled "interpreter", and during that appointment, both the patient and the therapist realized there had been major misunderstandings of the injury and the exercises to be working on--a direct result of the regular interpreter's failure to interpret accurately. The entire staff were amazed at the impact clear and accurate communication made. The patient had to mourn the waste of those three months where no progress in healing had been made.

In these examples I use quotation marks around interpreter as these two individuals have no formal training in interpretation theory, technical skills, or ethical decision making; no certification; no professional liability insurance; and do not participate in professional development. Many of the signers functioning as interpreters in Central Oregon have Deaf family members and are fluent in conversational sign language. Section 1557 of the Affordable Care Act does state that family members are not to interpret for patients. However, there is no such distinction that fluent family members can not interpret for other patients utilizing the same language. There currently exists zero avenues for members of the Deaf community to file complaints against such inadequate interpreting services, short of suing medical providers.

Because of such experiences as I have listed above, and the repeated testimony given by Deaf Oregonians in public hearings, members of the Deaf community are fearful to seek routine and emergency healthcare in Oregon. This is truly a healthcare crisis. I respectfully ask you to support the Oregon Sign Language Interpreter Licensure Bill because this law will protect the rights of Oregon's Deaf, Deafblind, and Hard of Hearing citizens.

Sincerely,
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