and the potential legal ramifications.

In Halifax, the Queen Elizabeth II Health Science Centre has instituted a policy that states hospital personnel are not permitted to witness documents generated outside the hospital that are not related to patient care, such as deeds and wills. The hospital’s legal counsel, Nancy Milford, says it is inappropriate for hospital staff to become involved. The decision followed experiences in which such documents proved to be a problem for both hospitals and the physicians involved.

The hospital does acknowledge that there will be times when no other option is available, and it has appointed commissioners of oath for this purpose. The province’s lawyers have been notified of the policy. For physicians, the best advice is that a wise doctor will think twice before agreeing to witness legal documents that are irrelevant to patient care. Such action may save them and their patients unneeded grief. — © Dorothy Grant, coordinator, patient–physician relations, Medical Society of Nova Scotia.

CMA adds voice to call for land-mine ban

The CMA has joined the chorus calling for a ban on the use of antipersonnel land mines. The often-undetectable mines, which the Economist recently described as “cheap little horrors,” kill or maim about 25,000 people a year. They continue taking their toll long after wars end because they are seldom defused. In a unanimous vote cast during the August annual meeting, the CMA lauded Canadian attempts to achieve a signed treaty banning the mines by this December. That treaty proposal received its biggest boost while the CMA annual meeting was under way, when the US announced it would support the Canadian plan. Three months ago it had dismissed the “Ottawa process” as unrealistic, but support had grown in the US, particularly among war veterans.

A report released in July indicated that during the Korean war American troops were more likely to be killed by their own mines than communist ones. Although the Ottawa process is unlikely to achieve a total ban because countries such as India and China will refuse to sign it, 106 countries had announced their support by

Language barriers fall at Vancouver hospital

Canada’s changing demographics are changing the way some hospitals deal with patients. For instance, St. Paul’s Hospital in Vancouver’s populous west end now trains staff and volunteers in language interpretation in order to serve the large number of new Canadians living downtown. Some 120 staff members who speak a total of 45 different languages have volunteered for the training. The program is run by Anneke Rees, the coordinator of volunteer resources, who says “we could always use more.” Staff receive a 6-hour training session that emphasizes impartiality and accuracy. Control remains with the patient, explains Rees, because the interpreter is “not responsible for making things work out.”

Cantonese translation is most in demand by far, followed by Gujarati, an Indian dialect, and Vietnamese. Translation for Polish and Russian patients is sometimes needed, for these new arrivals tend to concentrate in Vancouver’s west end. Rees emphasizes that the program involves language interpreting and not cultural interpreting, in which interpreters may act as advocates for patients. The St. Paul’s interpreters inform the health professionals involved if a cultural issue arises, but stay neutral.

The hemodialysis unit makes the greatest use of interpreters, both during predialysis education sessions and dialysis treatment. Dr. Ron Werb, the unit director, says about 50% of the patients speak Cantonese and he finds the service “absolutely invaluable in reducing patient anxiety.” Bolstering interpretation skills within the unit is Alison Chan, a Cantonese-speaking clerk, who has taken the training and uses it frequently.

Rees says service delivery remains the program’s greatest challenge. Although some procedures allow staff to reserve an interpreter, in most cases translation services are needed without notice. All parts of the hospital can call upon the volunteers around the clock, and a commercial service is available as a backup option. — © Heather Kent