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*Testimony of Representative Colleen Madigan, sponsor of*  
**LD 430, An Act to Provide Translation Services for Hospital Patients**  
*Before the Joint Standing Committee on Health and Human Services*

Good morning Senator Baldacci, Representative Meyer and colleagues on the Health and Human Services Committee. My name is Colleen Madigan and I live in Waterville and represent House District 64. I am here today to present LD 430, An Act to Provide Translation Services for Hospital Patients.

This bill comes out of a constituent concern. A Waterville resident and good friend of mine is close with her neighbors. They are a large, multigenerational family. Their primary language is Arabic. The grandmother had a stroke at home. They went to the hospital, just a short drive in Waterville. This was an emergency. But she doesn't speak English. A teenage grandchild was trying their best to translate the symptoms to the medical staff and be the go between for their grandmother and the medical staff. That's a heavy responsibility in a crisis. The patient was discharged to home and soon after had another bigger stroke. She was much sicker and needed to be hospitalized.

We all have seen the signage in hospitals and healthcare facilities about translation services. We have federal law about it as well. But often in the real world it falls to a family member to provide the translation. It can also be difficult for family members to translate, particularly in regards to translating medical terminology. In addition, numerous forms—consent to treat, releases, etc., are given to patients, who may not have a good understanding of the forms or the need for them. We need to do a better job of providing patients with accurate information in their own language. In addition, providers need to have the most accurate information about symptoms, duration and current medications so they can provide the best treatment. In the case of the grandmother I mentioned above, if doctors had been able to get accurate information about what was going on with her, they might not have sent her home initially.

Two other important pieces of this bill are about discharge plans and prescription information. Following up on discharge plans and taking medication as prescribed are two of the best indicators on whether there will be a good outcome following an emergency room visit or hospitalization. Many readmissions are due to not following discharge plans and not taking medication as prescribed. IT is difficult to follow or take medication if you cannot understand the

instruction. I propose that these need to be provided to patients in a language they can understand.

Thank you and I would be happy to answer any questions you may have.