

Court Interpreter Program

Complaint Procedure Related to Language Services

I. Introduction.

Competent and ethical court interpreters are critical to ensure that non-English speakers and those who are Deaf or hard-of-hearing may enjoy equal access to justice. Interpreters are highly skilled professionals who fulfill an essential role in the administration of justice. Delaware court interpreters act as officers of the court while providing interpretation services. They are subject to Delaware certification and registration requirements and must adhere to the [Code of Professional Responsibility for Court Interpreters](#) adopted by the Delaware Supreme Court.

The Administrative Office of the Courts' ("AOC") [Court Interpreter Program](#) ("Program") is responsible for administering language services through its Program Coordinator. The Coordinator manages the day-to-day administration of the Program, including fiscal oversight of the Program, interpreter testing and certification, scheduling, discipline, and maintaining the registry of active interpreters. The Coordinator regularly communicates with interpreters and the Court Interpreter Advisory Board ("Board") on the Program's operations, policies, and procedures. The Coordinator is the Program's public point of contact.

Below is a description of the procedure for submitting a complaint related to language services.

II. Complaint.

Interpreters retained by the Court Interpreter Program must comply with the [Code of Professional Responsibility for Court Interpreters](#) and any other applicable Program policies and Rules.

Anyone – court staff, litigant, attorney – may submit a complaint related to services provided by the Court Interpreter Program by filing the AOC's Complaint Form or in the manner outlined in Section A below.

This complaint process is not intended for minor interpreting errors made by interpreters during a proceeding unless there is an allegation of gross incompetence, knowing misinterpretation, or misrepresentation. It is intended to report behavior that disrupts the Program's normal operations or that is in violation of the [Code of Professional Responsibility for Court Interpreters](#).

A. How to initiate a complaint.

Complaints must be in writing, must describe the alleged inappropriate conduct, must be signed, and should be submitted to the Coordinator. The AOC form at the end of this policy

can be used for this purpose. Within 30 days of receipt of the complaint, the Coordinator shall investigate the matter; take necessary remedial steps; and provide written notice to the complainant that the issue is being addressed. If an extension of time is needed, the Coordinator shall notify the complainant of the reasons requiring the extension of time.

If the Coordinator is the subject of the complaint, the complaint should be submitted to the AOC's Deputy State Court Administrator or the AOC's Human Resources Administrator listed on the [Delaware Courts' Human Resources Contacts webpage](#).

B. Sanctions and remedies.

The degree of discipline to be imposed will depend upon factors such as seriousness of the violation, the intent of the interpreter, whether there is a pattern of improper activity, and the effect of the improper activity on others or on the judicial system. Records of sanctions and remedies will be maintained and treated like personnel records.

The Program reserves the right to suspend an interpreter from current or future scheduling to provide interpretation services until the investigation into the complaint has been completed. Suspension will automatically result when the complaint alleges:

- Arrest for a felony or a misdemeanor Classes A or B during the time that they are eligible to serve as an interpreter that reflects adversely on the interpreter's honesty, trustworthiness, or fitness as an interpreter in other respects.
- Notice from the Department of Justice of an investigation pursuant to Title 16, Section 906.
- Fraud, dishonesty, or corruption which is related to the functions and duties of the court interpreter.
- Continued false or deceptive advertising after receipt of notification to discontinue.
- Purposeful disclosure of confidential or privileged information obtained while serving in an official capacity.
- Failure to comply with all disciplinary sanctions imposed by the Court Interpreter Program Coordinator.
- Knowingly failing to disclose a conflict of interest.
- Any other violations of the Court Interpreters' Code of Professional Responsibility.

Date last modified: 2023

DELAWARE ADMINISTRATIVE OFFICE OF THE COURTS
COURT INTERPRETER COMPLAINT FORM

This form should only be completed to report an interpreter’s conduct or inability to access language services. You should not use this form to disagree with a decision made by a judicial officer in your court case or to sue someone.

A. Your name and contact information:

First MI Last

Address:

 Street City State Zip Code

E-mail address:

Telephone with area code:

B. Who are you complaining about?

Name:

Position (if known):

C. What are you complaining about?

Please fully and completely state the facts and circumstances of your complaint. PLEASE BE SPECIFIC, referring to relevant dates, times and names of all persons involved. Attach as many additional pages as necessary.

Date

Your Signature

AOC USE ONLY:

RECEIVED BY:

DIRECTED TO:

COMPLAINT NO.

DATE:

DATE:

This form can be sent:

By Mail To: The Administrative Office of the Courts
405 N. King St. Suite 507
Wilmington, DE 19801

By Fax: (302) 255-2217

By E-Mail: court.interpreterprogram@delaware.gov

DELAWARE ADMINISTRATIVE OFFICE OF THE COURTS
FORMULARIO DE QUEJA POR SERVICIOS DE INTERPRETACION

Este formulario debe completarse solamente si desea presentar una queja debido a la conducta de un intérprete o por la falta de acceso a servicios de idiomas. No se debe usar este formulario para expresar un desacuerdo con una decisión judicial relacionada a su causa o para demandar a alguien.

A. Su nombre e información de contacto:

Apellido/s

Nombre/s

Dirección:

Calle y número

Ciudad

Estado

Código Postal

Dirección de correo electrónico:

Teléfono con código de área:

B. ¿De quién se está quejando?

Nombre:

Puesto:

C. ¿Cuál es el motivo de su queja?

Por favor incluya todos y cada uno de los hechos y circunstancias que motiven su queja. Por favor PROPORCIONE DETALLES ESPECÍFICOS, mencionando las fechas y horas pertinentes y a cada una de las personas involucradas. Puede adosar tantas hojas adicionales como sea necesario.

Fecha

Su Firma

PARA USO EXCLUSIVO DE AOC:

RECEIVED BY:

DIRECTED TO:

COMPLAINT NO.

DATE:

DATE:

Este formulario puede enviarse:

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Wilmington, DE 19801

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