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 Owner: Juanita Robinson: Mgr, Nursing  
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## Language / Communication Services for Patients with a Communication Deficit, 100

### Outcome Goal

To provide a mechanism for the non-English speaking or deaf patient and/or the patient with complete or limited upper limb mobility to access appropriate interpreter services or communication devices that ensure adequate two-way communication between the patient and individuals who have a role in providing the patient's medical care during hospitalization and support network.

### Team Member Responsibilities

Any member of the Interdisciplinary team may initiate interpreter services or access communication devices. The Shift Coordinator (SC) or designee must make a request for such service to the Administrative Supervisor (AS) or Medical Social Worker (MSW). Hospital staff may give translation of informal non-medical information.

### Supportive Data

In compliance with the Health and Safety Code Section 1259, Title VI of the Civil Right Act, and other applicable state and federal codes, laws, rules, and regulations, SAFH will provide interpretive services in order to facilitate equal and effective health care delivery. Telephonic interpretive services are available immediately 24 hours a day, seven days a week.

On-site staff can be available for interpretation for non-medical information ONLY.

When a contracted interpreter is the preferred method of communication, an interpreter may assist the patient and hospital staff in any situation in which effective communication is necessary:

1. Obtaining the patient's medical history.
2. Explaining diagnosis, treatment and prognosis of any illness.
3. Explaining the need for "Advance Directive" information.
4. Obtaining an informed consent for surgery or any invasive procedure (except when there is a medical emergency or the patient is unable to give consent).
5. Communication during preparation for surgery and recovery after surgery
6. Explaining prescribed medication, how and when they are to be taken and possible side effects.
7. Obtaining permission for treatment decisions.

8. Explaining patient follow-up care upon discharge from the facility.

## Policy

It is the policy of Sutter Auburn Faith Hospital to provide language assistance services to patients with language or communication barriers, including both spoken and sign language.

## Procedure:

A learning assessment is completed on patients during the admission process and a determination is made of their need for and type of language assistance and documented. Any member of the Interdisciplinary team may initiate interpreter services or access communication devices. The Shift Coordinator (SC) or designee must make a request for such service to the Administrative Supervisor (AS) or Medical Social Worker (MSW). Hospital staff may give translation of informal non-medical information.

### A. Language services:

1. Determine the language and dialect in which the patient is most conversant.
  - a. **For over-the-phone interpreter:** upon admission, admitting nurse is responsible to call the CyraCom as primary vendor to arrange for an interpreter by phone.

1-520-232-1804

Transperfect as secondary vendor to arrange interpreter by phone

1-408-403-4111

- b. **For onsite language interpreter:** (Interlingva Interpreting and Translating Services):

Call (916) 273-6799. All requests are for a 2 hour minimum per request and a 24 hour cancellation is needed. Note: Interlingva is best used for Southeast Asian and Asian Languages.

- c. Language line phones are located on all inpatient care departments, diagnostic imaging, registration, laboratory, the ED, outpatient Wound Care Clinic and Infusion Therapy Center.

### B. Deaf Patient

1. **Tele Typewriter (TTY) Phone (Uniphone 1140):** This phone allows for two-way communication for the deaf person. It allows for incoming and outgoing calls at the patient's bedside. A visual display allows for a written script of the conversation for the patient to review.
  - a. The patient should be placed close to the Nurses' Station, if possible.
  - b. The TTY phone should be hooked up at the patient's bedside.
    - i. Refer to set up instructions in booklet on Using Your Uniphone 1140.
    - ii. Refer to instructions for making and answering a TTY call in the booklet for Using Your Uniphone 1140.
  - c. Each of the following departments have a TDY phone: Emergency, Surgical Unit, and Medical-Telemetry (shared with ICU).

- d. A TTY phone is available from PBX operator if an additional phone is needed.
- e. **Nursing Unit Responsibilities:** When the patient is discharged, return the phone to the designated storage area within your department. Ensure that the booklet on Using Your Uniphone 1140 is kept with the phone.

## 2. Onsite American Sign language Interpreting Services Agency

- a. To arrange a time for a Certified Deaf Interpreter (CDI) to be at the patient side, call Eaton Interpreters at 916-721-3636 or Sign language interpreting Services Agency, dba Wilder Interpreters, at 916-483-4751, Monday through Friday between 0800-1700, to speak to a receptionists/ scheduler who will answer your questions.
- b. If calling after hours, week-ends, holidays or in an emergency:
  - i. Call Eaton at 916-721-3636 or Wilder at 916-483-4751 and the answering service will dispatch an interpreter (evenings, weekends and holidays) immediately for the time needed.
  - ii. The certified interpreter on call will obtain the patient information from the hospital contact, i.e., contact phone number, location, patient name, and situation. The interpreter will be dispatched to arrive within a 30 minute or less window (this could vary plus or minus depending on the location of the interpreter and the facility).
- c. The interpreters will arrive at the site and ask for the contact person and deaf patient

## 3. Closed Caption TV Services can be accessed by

- a. All patient rooms have a TV with a closed "caption" button.
- b. There is also an easy access closed "caption" button on the patient's call light pendent.

## C. Other Communication Devices or Adjuncts

For the patient with limited or no upper limb motion, the "Pillow-Soft touch" nurse call device or the "BLOW" nurse call device can be hooked up in that patient room. Contact Administrative Supervisor for directions.

# Documentation

Document in the interpreter flowsheet, the use of a service/device and the patient's response. Include the use of an interpreter (identify if professional interpreter) and the content of the conversation in the patient's medical record.

# References

Health and Safety Code Section 1259.

Title VI of the Civil Right Act.

Using Your Uniphone 1140, by Ultratec Inc., 6<sup>th</sup> ed. 2002.

All revision dates:

12/1/2015

## Attachments:

 [A: Language ID Chart Trifold](#)