

Origination 2/1/1982 Owner Kim Meyers: CNE, SAFH Final 3/14/2022 Approved Policy Area Administrative **Sutter Health** Sutter Auburn Faith Hospital Effective 3/14/2022 **Applicability** Sutter Auburn Faith Hospital Last Revised 3/14/2022 Next Review 3/14/2023

Interpretive Services for Patients with a Communication Barrier, 100

POLICY

SAFH shall ensure participation of limited English-Proficient (LEP) patients in the services and benefits it provides. LEP patients will be notified of their right to an interpreter.

In any situation where communication is necessary. This includes the registration/admitting process, and inpatient and outpatient services. If the patient wishes to use their own interpreter, SAFH must at least provide informed consent in a language the patient can understand. This means staff would need at a minimum to use the language line telephone or video remote interpreting service for informed consent and to have the patient appoint their own interpreter. In general, children should NOT be used for interpretive services. Notices that advise patients and their families of the availability of interpreters, and the procedure for obtaining an interpreter will be posted in conspicuous locations, i.e., emergency room, admitting area, entrance area, and in outpatient surgery, imaging.

Patient communication options shall include:

- Sign language interpreters
- · Assisted listening devices
- Telephonic language interpreters
- Video interpreters
- · On-site language interpreters
- · Translated written materials

DEFINITIONS

Limited English-Proficient or (LEP) means:

A limited ability or inability to speak, read, write, or understand the English language at a level that permits the person to interact effectively with health care providers or social service agencies.

Interpreter means:

An individual who mediates spoken or signed communication between people speaking different languages without adding, omitting, or distorting meaning or editorializing. The objective of the interpreter is for the complete transfer of the thought behind the utterance in one language into an utterance in a second language.

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.
- 9. Assisting registration, admission process
- 10. Discharge instructions

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. Availability of Interpreter Services:

- 1. For over-the-phone interpreter: upon admission, admitting nurse is responsible to call Language Line Solutions® as primary vendor to arrange for an interpreter by phone.
 - a. Determine the language and dialect in which the patient is most conversant 1-844-961-3216
- 2. Transperfect as secondary vendor to arrange interpreter by phone 1-408-403-4116
- 3. **Onsite language interpreter:** (Interlingva Interpreting and Translating Services) Call (916) 273-6799
 - a. 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.
 - 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. Language Services - offsite

- 1. Dial 1 (800) 276-2519 (9)
- 2. Enter your account # 22843
- 3. Enter your PIN # 1000
- 4. Please say the language you need
- 5. Select if you would like to add an additional person to the call
- 6. Hold temporarily as you are connected to an interpreter
- 7. Document the interpreter ID number in something patient-specific as proof of using a certified interpreter.

C. Equipment/Assistive Devices

- 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. Printed directions on use of the equipment is kept with the equipment.
 - 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:

- 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.

D. 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.

E. VRI may be a useful tool to establish effective communication with deaf or hard-of-hearing patients/visitors, however VRI is not appropriate in all situations.
VRI use in situations outlined in Appendix D is generally discouraged and should be considered only in rare instances and with the approval fo the Integrated Quality Risk Director, Nurse Manager, or Physician.

Remote Interpretation (VRI)

Refer to SAFH Video Remote Interpreting for Sign Language

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., 6th ed. 2010

All Revision Dates

3/14/2022, 6/2/2017, 10/18/2016, 12/1/2015

Attachments

B: Video Remote Interpreting for Sign Language

C: In-Sight Video Interpreter User Guide

D: VRI Communication Assessment

E: Procedure for Ordering In-Person Sign Language Interpreters

Approval Signatures

Step Description	Approver	Date
Medical Affairs Committee/ Board of Directors	Hilary Mulligan: Coord, Medical Staff	3/14/2022
MEC	Hilary Mulligan: Coord, Medical Staff	3/14/2022
Admin Team	Carol Zobel: Executive Secretary FT/PT	1/26/2022
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