

*Ukiah Valley Medical Center*

- Entity(s): Ukiah Valley Medical Center**
- Network: Northern California**
- System-Wide Corporate Policy**  
Corporate Policy No.
- Standard Policy**
- Model Policy**

Entity(s) Policy &amp; Procedure No. 10245

Department:

Administration

Manual:

**POLICY & PROCEDURE: INTERPRETER COMMUNICATION SERVICES****POLICY SUMMARY/INTENT:**

To define resources within and outside of the Ukiah Valley Medical Center for communicating with customers who have limited English proficiency or are non-verbal. In this way we will be able to assess the patient needs and communicate care instructions to the patient and family more effectively.

**DEFINITIONS:**

Not applicable

**AFFECTED DEPARTMENTS/SERVICES:**

All

**POLICY: COMPLIANCE - KEY ELEMENTS****POLICY:**

At no cost to the patient and in addition to services already available in-house, the hospital undertakes reasonable efforts to provide interpreters, including sign language, for its patient/family members who are in need of such services. Information will be available/posted in initial patient contact areas. This includes any area where a patient is registered for service.

**PROCEDURE:****A. Interpretation is required for any medical/legal communication, this includes:**

1. Consent, risk/benefits, treatment options, assessment, education, required follow-up/discharge information.
2. Social interaction and basic care needs do not require a qualified interpreter.

**B. A language interpretation service is available by telephone 24 hours per day for any area of the organization requiring interpretation service:**

1. To access language interpretation by telephone, call Optimal Phone Interpreters at 1- 877-746-4674. There is no access code required. Any employee or physician may call.

- a. UVMC staff should consider three-way conversation via speakerphone or dual headset phone when using an external interpreter service. (Patient, staff member/physician, and interpreter)
  - b. Patient and physician or nurse must be on the conference call with interpreter for medical interpretation.
  - c. Patient and a staff member must be on the conference call with interpreter for non-medical interpretation.
  - d. Give your name and department at UVMC.
  - e. State language desired and await interpreter access.
2. To access language interpretation by Video Remote Interpretation (VRI)
    - a. Obtain VRI portable monitor or ipad, turn on.
    - b. Select the required language by touching the icon on the screen.
    - c. Protect patient confidentiality by only using these tools in a locataion where you assure patient confidentiality, interpreter will be on a speaker.
    - d. When interpreter presents, announce yourself and that you are from UVMC.
  3. Determine if there is an employee on duty in the department that can provide needed language skills.
    - a. Consult interpreter list for in-house bilingual skills and attempt to contact available individuals with appropriate skills. **\*\*Note\*\*** this list is separated by medical and non-medical translation.
      1. In-house interpreters are assessed before they are placed on the list.
      2. Assessment of interpreter skills is performed by Optimal or equivalent. Certification available in employee file.
      3. In-house interpreter list is maintained by Human Resources.
    - b. Anyone interpreting must terminate the encounter if the interpretation is beyond their proficiency level and must request another interpreter or certified interpreter be used instead.
  4. Determine if patient has brought a person who they would prefer to have act as interpreter for communication. Employee or physician shall speak with person designated by the patient as their preferred interpreter and shall determine, to the healthcare provider's comfort, that the person designated to be an interpreter is able to effectively convey the message or questions in order to carry out the required medical activity. The healthcare provider staff is obligated to decline to use the designated person as an interpreter if they are not comfortable in this designated person's abilities. Use of children is discouraged.
  5. If language interpreter services are not available in the specific needed dialect.
    - a. Document actions taken to obtain interpreter, include who was contacted.
    - b. Notify house supervisor or Department Director.

### C. Hearing Impaired

Hearing Impaired patients communicate through a variety of methods including conventional non-verbal communication such as lip reading, sign language, written communication, or combinations of the above. An effort should be made to ascertain which method the patient prefers before obtaining assistance.

1. Obtain VRI portable monitor and turn on.
  - a. Obtain patient consent for use.
  - b. Select correct tab for sign language and initiate as in 2. B. above.
2. Alternative options
  - a. Determine if there is an employee on duty in the department that can provide needed language skills.
  - b. Consult interpreter list for those who can sign in-house and contact available skilled staff.
  - c. Determine if patient has brought a competent person who they would prefer to have act as interpreter for communication.
    1. Employee or physician shall speak with person designated by the patient as their preferred interpreter and shall determine, to the healthcare providers comfort, that the person designated to be an interpreter is competent to convey the message or questions in order to carry out the required medical activity.
    2. The healthcare provider staff is obligated to decline to use the designated person as an interpreter if they are not comfortable in this designated person's abilities.
3. If the patient does not have an established source for interpreter services and none of the above communication methods are deemed appropriate, contact the House Supervisor. The House Supervisor or hospital representative will contact the service for deaf interpreters. This service is called Communiqué located in Santa Rosa. For immediate needs or after office hours contact Communiqué. (See Section H below).
4. Scheduled services-Patient should be encouraged to bring with them the person they ordinarily use for interpreter services. If the patient does not have a regular resource for interpreter services, Communiqué should be contacted to arrange for an interpreter.
5. The hospital will guarantee payment of the interpreter's customary charges in cases where an interpreter may be required to ensure effective communication for crucial medical communication. The interpreter should submit a statement directly to Administration. The statement must include the patient's name, date and time of service, and signature of the hospital representative verifying services. The hospital will not pay for interpreter services provided by the patient's usual interpreter, if any, or for interpreter services provided by friends or family members of the patient if such persons do not ordinarily charge for services they provide to the patient.
6. Hearing Impaired patients admitted to the hospital-contact the House Supervisor to arrange for the T.D.D. telephone equipment.
7. Use of the Telecommunication Device for the Deaf or T.D.D.-see policy Receiving Calls on the T.D.D.

#### **D. Language Identification:**

1. The "face sheet" and Patient Data Profile will contain:
  - a. Patient language is printed on the "face sheet" for English, Spanish, or other.
  - b. A notation on the Patient Data Profile of the patient's language of fluent communication if other than verbal English.

**E. Documentation:**

1. Interpreters or interpreter's service is documented in the medical record.
  - a. Patients consent to use interpreter or VRI.
  - b. Patient's decision to decline interpreter services and use an adult family member or friend instead.
  - c. Information read to or translated to the sight impaired.
  - d. The service, phone or video, functioned properly.
  - e. Interpreters should sign and date forms or consents that were translated.
  - f. Obtain and document interpreter ID when using VRI system.
  - g. Document name and or ID of interpreter used in the medical record.

**F. Interpreter Related Complaints:**

See policy-Complaint and Grievance

**G. Interpreter/Communications Services Policy review required annually:**

This policy is to be reviewed and sent to CDPH annually. <http://www.cdph.ca.gov/certlic/facilities/Pages/LCDistrictOffices.aspx> to get fax number for Redwood Coast/Santa Rosa office

**H. To contact Communiqué for American Sign Language Interpreting**

Monday-Friday 8:00am – 4:00pm

707-546-6869 ☎

Paging Communiqué: Urgent requests after-hours only  
707-546-6869 ☎ Press #2 or email [CQER@att.blackberry.net](mailto:CQER@att.blackberry.net)

Faxing a request: For the form, call the Communiqué office or go to website  
[www.communiqueinterpreting.com](http://www.communiqueinterpreting.com)  
Fax# 707-546-1770 ☎

Making a request on-line:  
[www.communiqueinterpreting.com/request\\_an\\_interpreter.shtml](http://www.communiqueinterpreting.com/request_an_interpreter.shtml)

To arrange for interpreting, please provide the following information:

- A. Your name, phone number, and company name
- B. Date of interpreting assignment
- C. Start and end times
- D. Address and room name or number where the interpreter will be working
- E. Type of assignment (medical appointment etc)
- F. Name of client needing interpreting services

Communiqué will call to confirm when an interpreter is scheduled.

**REFERENCES:****CALIFORNIA:**

HAWAII: Not applicable  
OREGON: Not applicable  
WASHINGTON: Not applicable

CORPORATE AUTHOR: Not applicable  
SITE SPECIFIC POLICY OWNER: VP - Patient Care Srvs  
COLLABORATION: Risk Manager AssIP/Accrediat/Risk

APPROVED\_BY:  
CORPORATE: Not applicable  
HOSPITAL: ( 04/18/2016 ) Policy & Procedure Committee , ( 06/08/2016 ) Executive Committee , ( Not yet approved ) Governing Board,

INDIVIDUAL:  
REVIEW DATE: 11/25/2014, 11/25/2014,  
REVISION DATE: 02/04/2014,  
NEXT REVIEW DATE:

ATTACHMENTS:  
(REFERENCED BY THIS DOCUMENT) <http://www.cdph.ca.gov/certlic/facilities/Pages/LCDistrictOffices.aspx>  
[www.communiqueinterpreting.com](http://www.communiqueinterpreting.com)  
[www.communiqueinterpreting.com/request\\_an\\_interpreter.shtml](http://www.communiqueinterpreting.com/request_an_interpreter.shtml)

OTHER DOCUMENTS:  
(WHICH REFERENCE THIS DOCUMENT)

DISTRIBUTED TO: Refer to AFFECTED DEPARTMENTS/SERVICES above

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[https://www.lucidoc.com/cgi/doc-gw.pl?ref=uvmc:10245\\$1](https://www.lucidoc.com/cgi/doc-gw.pl?ref=uvmc:10245$1).

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