

Interpreter, Language and Hearing Services

10815

Official (Rev: 17)

**Source:**

Administrative
Administrative

Applies to Facilities:

All Palomar Health Facilities

Applies to Departments:

All Clinical Departments

I. **PURPOSE:**

- A. To facilitate the communication needs of patients who have limited English proficiency (LEP) or who are hearing- or sight-impaired.

II. **DEFINITIONS:**

- A. **Assisted Device:** Any device used to assist a hearing- or sight-impaired individual.
- B. **Dual-Role Interpreters:** Palomar Health employees who are qualified to provide medical interpretation on their assigned unit.
- C. **CyraCom Telephones:** CyraCom ClearLink is a patented dual-handset telephonic service that provides a 24-hour foreign language medical interpretation service.
- D. **CyraCom Video Remote Interpretation (VRI) Service:** CyraCom VRI service is an on-demand interpretation service provided via high-quality video conferencing.
- E. **American Sign Language (ASL) Interpreter:** An individual that provides interpretation services for the hearing impaired.
- F. **Pathmaker Medical Interpreter:** A Pathmaker Intern who serves as a Spanish language liaison between patients and their care providers as their learning experience in the [Pathmaker Internship Program](#). These individuals are not trained to interpret outside of Palomar Health.
- G. **Limited English Proficiency (LEP) Patients:** Patients whose native language is other than English and who cannot speak, read, write, or understand the English language at a level that permits them to interact effectively with health care providers.

III. **STANDARDS OF PRACTICE:**

- A. Palomar Health provides equal access to and equal participation in health care activities for hearing- or sight-impaired individuals and for persons with limited English proficiency in accordance with federal, state, and regulatory agencies.
1. Communication aids and services are provided at no cost to patients during the course of care as well as during health education programs that are open to the public.
- B. Palomar Health has or has contracts with organizations to provide the following approved language mechanisms:
1. Dual-Role Interpreters, Pathmaker Medical Interpreters, ASL Interpreters, CyraCom phones, CyraCom VRI carts, Teletypewriter (TTY) phones, or "Big Button Plus" phones.
- C. Staff uses interpretation services to promote thorough and accurate communication with LEP patients and families. Interpretation services are required to be used for the following by medical staff who are not proficient in the patient's native language, but are not limited to:
1. Obtaining a medical history
 2. Informed Consent
 3. Explaining a diagnosis and plan for medical treatment
 4. Explaining any change in regimen, environment, or condition
 5. Procedures/surgery
 6. Medication instructions and explanation of possible side effects
 7. Discharge planning
 8. Legal issues (advance directives, guardianship, etc.)

- D. In emergency situations, staff provides treatment in accordance with standard medical practice. Staff seek interpretation services promptly, but do not delay treatment pending the arrival of interpretation services.
- E. Dual-Role Interpreters or Pathmaker Medical Interpreters provide in-person interpretation.
 - 1. Human Resources coordinates the Interpreter Testing Assessment for Dual-Role Interpreters with a contracted service, CyraCom. CyraCom sends the assessment results and candidate scores for Human Resources to review and store in the employee file as outlined in [Personnel Files, Records, and Retention Standards](#) procedure. Dual-Role Interpreters are identified by their ID badge printed with the word "Interpreter."
 - 2. Pathmaker Medical Interpreters must pass a Spanish Language Proficiency Assessment and attend training provided by a Certified Health Care interpreter. Pathmaker Medical Interpreters are identified by their green Pathmaker scrubs and badge backer that says "Medical Interpreter."
 - a. Availability of a Pathmaker Medical Interpreter varies and is dependent upon their scheduled shifts.
- F. Medical staff, (such as Anesthesiologists, Nurse Practitioners, Physician Assistants and Registered Nurses (RNs), may not communicate directly any of the items listed in Section C with an LEP patient unless qualified by Human Resources as a Dual-Role Interpreter in that language or have displayed fluency in medical terminology in the patient's language upon employment..
- G. Staff cannot ask, suggest, or encourage a patient's family member, significant other, or friend to interpret because it may result in omission, substitutions, and semantic errors that distort care, breaches in confidentiality, and difficulties dealing with sensitive issues.
 - 1. California law prohibits children under the age of fifteen (15) to serve as an interpreter.
- H. CyraCom devices (dual handset telephones and VRI carts) are available throughout the health system and these devices allow 24/7 access to a qualified medical interpreter.
 - 1. If a CyraCom device is not available, Palomar Health staff have access to CyraCom services through any network-connected speaker phone by dialing 881-6722 and pressing 2.
 - 2. If a department is in need of a CyraCom device, email Interpreting@palomarhealth.org to submit the request.
 - 3. CyraCom interpretation services are also used by staff for the following situations when necessary:
 - a. PBX incoming calls
 - b. Third-party calls
 - c. Outgoing calls to a LEP patient
- I. Palomar Health has a contract(s) with qualified ASL Interpreters for the hearing impaired. The PBX Operator can be contacted (442.281.5000) to be transferred to a contracted service.
 - 1. The Emergency Department contacts the contracted qualified ASL interpreter for Emergency Department patients.
 - 2. The Nursing Supervisor or designee may contact the contracted qualified ASL Interpreter to be present at the facility as necessary.
- J. The TTY phone is available from PBX for hearing- or sight-impaired individuals.
- K. For some sight- or hearing-impaired patients the "Big Button Plus" telephone from PBX is useful. This phone has:
 - 1. Large keys with raised numbers
 - 2. Braille augmentation
 - 3. Volume enhancement for handset, speaker phone, and ringer
 - 4. Hearing aid adapter

IV. **STEPS OF PROCEDURE**

- A. On admission to a Palomar Health facility, staff assesses and identifies any barriers to communication. Patients are asked to identify their language spoken at home and any need for an assisted device.
 - 1. Registration captures the patient's spoken language at home and documents this in the medical record. The patient's language populates on the Patient Summary screen in the Electronic Health Record (EHR).
 - 2. On admission, nursing documents the patient's spoken language at home in the Adult History Form.

3. If the patient is unable to communicate the language they speak, their language information can be obtained from family or a significant other, or a CyraCom telephone can be utilized.
- B. Staff utilizes assisted devices or interpreters or both to promote accurate communication and patient understanding.
1. Pathmaker Medical Interpreters are contacted by dialing 881-6722 and pressing 1 through any network connected phone.
 2. Palomar Health staff set-up the CyraCom device at the bedside, assist with interpretation, and document the interpretation session.
 - a. When the CyraCom device is no longer in use, Palomar Health staff remove, clean, and store the CyraCom device in the designated unit-specific location.
 3. When hearing- or sight-impaired individuals are admitted as an inpatient or outpatient and do not provide their own interpreter:
 - a. Staff checks out the TTY phone from PBX and deliver it to the patient's room.
 - b. Staff follows instructions on the TTY phone for set-up.
 - c. Staff institutes other nursing interventions for immediate communication (i.e. communication boards).
 4. When interpretation services are utilized, documentation is made as a clinical note with the name of the interpreter, their ID number, and their position. This documentation must also be noted on the consent.
 - a. If the patient refuses to utilize a Palomar Health approved language mechanism, the patient's refusal is documented as a clinical note. The note contains the services offered and the reason for refusal.

V. PUBLICATION HISTORY:

Revision Number	Effective Date	Document Owner	Version Notes
17 (this version)	07/08/2019	Christina P Perdomo Mgr Career Development	Revised to include Video Remote Interpretation content and to reflect current practices. [Owner changed from Perdomo, Christina P to Ebal-Gangoy, Jeanette L by Agraz-Baza, Diana on 25-JUL-2019]
16 (Changes)	08/08/2017	Fran Waller Dir Comm Eng and Vol Dev	Updated to reflect current practice [Owner changed from Waller, Frances to Van Cleef, John by Avila, Julie on 13-NOV-2017] [Owner changed from Van Cleef, John to Laundrup, Dawn by Avila, Julie on 02-MAR-2018] [Owner changed from Laundrup, Dawn to Perdomo, Christina by Avila, Julie on 13-APR-2018]
15 (Changes)	07/28/2017	Fran Waller Dir Comm Eng and Vol Dev	wording revision
14 (Changes)	05/11/2017	Fran Waller Dir Comm Eng and Vol Dev	Clarify language around Interpreter Services needed
13 (Changes)	04/28/2017	Fran Waller Dir Comm Eng and Vol Dev	Revised to reflect current practice
12 (Changes)	10/30/2016	Fran Waller Dir Comm Eng and Vol Dev	Updated to reflect current practice.
11 (Changes)	10/02/2013	Brad Krietzberg Director Organizational Learning	Updated to clarify standards of practice for ASL utilization and

(Changes)		Learning	practice for ASL utilization and invoicing
10 (Changes)	05/22/2013	Brad Krietzberg Director Organizational Learning	Updated to reflect current practice and contact info.JM 5-08-13
9 (Changes)	12/04/2012	Brad Krietzberg Director Organizational Learning	Added verbiage regarding RNs communicating in patient's preferred language
8 (Changes)	02/06/2012	Brad Krietzberg Director Organizational Learning	Formatted by RS
7 (Changes)	08/16/2011	Brad Krietzberg Director Organizational Learning	Updated to reflect recent changes in practice.
6 (Changes)	02/28/2008	Sharon Andrews, RN, MS, CNAA-BC Consultant - Palomar Medical Center West	The only revision is to change the review timeframe to annually to meet regulatory requirements.
5 (Changes)	02/21/2008	Sharon Andrews, RN, MS, CNAA-BC Consultant - Palomar Medical Center West	Revised to include the requirement to annually transmit to DPH a copy of the update procedure and efforts to ensure adequate and speedy communication for LEP patients
4 (Changes)	09/20/2007	Sharon Andrews, RN, MS, CNAA-BC Consultant - Palomar Medical Center West	Revised to include new combined positions and use of dual handset phones.
3 (Changes)	10/15/2004	Jane Frincke	
2 (Changes)	10/08/2004	Jane Frincke	Updated with 2004 laws
1 (Changes)	05/17/2002	Kim Jackson Director Health Information Services & Privacy Officer	The previous revision date is: 01/31/02.

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VI. REFERENCES:

Reference Type	Title	Notes
Referenced Documents	Personnel Files, Records and Retention Standards	Personnel Files, Records and Retention Standards
Referenced Documents	Pathmaker Internship Program	

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<https://www.lucidoc.com/cgi/doc-gw.pl?ref=pphealth:10815>.