

 Oroville Hospital	<h1>Interpreter Services</h1>		Manual: Corporate Compliance
			Section: Interpreter Services
			Issued by: Corporate Compliance
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Purpose

Oroville Hospital recognizes the right of every patient to understand and be informed about their health care needs. Furthermore, Oroville Hospital realizes that communication barriers may exist between patients and hospital staff members due to language barriers, hearing impairment or other disabilities. Oroville Hospital will take such steps as are necessary to ensure that qualified persons with disabilities, including deaf and hard of hearing or speaking skills, or visually impaired receive effective notice concerning benefits or services or written material concerning waivers of rights or consent.

“Interpreter” means a person fluent in English and in the necessary second language, who can adequately speak, read, and readily interpret the necessary second language, or a person who can accurately sign and read sign language. Interpreters shall have the ability to translate the names of body parts and to describe competently symptoms and injuries in both languages. Interpreters may include members of the medical or professional staff.¹

Patients have the option to use friends or family (who volunteer) as Interpreters or to use Interpreter services offered through the hospital. However, Interpreter services must be offered and contact made with an appropriate Interpreter within thirty minutes of staff being made aware that interpretive services are needed. The use of a family member or friend as an Interpreter is acceptable when the patient has been made aware of the availability of qualified Interpreters at no additional cost, and without any coercion whatsoever, chooses to use family or friends as an Interpreter.²

At no time will the Hospital be held in non-compliance if the response time is delayed because of a force Majeure event. Force Majeure events are events outside the reasonable control of the Hospital, the interpreting service (IS) Provider or the Interpreter called to respond, such as weather problems and other Acts of God, unanticipated illness or injury of the Interpreter while enroute to the Hospital and unanticipated transportation problems (including, without limitation, mechanical failure of the Interpreter’s automobile, automobile accidents and roadway obstructions other than routine traffic or congestion, or the Interpreter getting lost). For Video Remote Interpreting (VRI), this may include but not limited to the loss of power or internet access due to Acts of God or electrical issues etc., loss of services and other such reasons beyond the Hospital’s control.

¹ Section (b)(1) of California Health and Safety Code; Section 1259

² Section (c)(2) of California Health and Safety Code; Section 1259

Quick Summary

- ❖ Identify patients who may require interpretive services at time of initial contact.
- ❖ Identify what type of Interpreter service is necessary, whether language other than English, or sign language interpreting. It is acceptable to use a paper and pen to communicate with during the initial encounter. Retain this document and have this scanned into the patient record.
- ❖ Verify if the patient consents to use our contracted providers for translation services.
- ❖ If a language interpreter is needed, use the laminated help sheet, and phone equipment with speaker capability if using telephone Interpreter services or you may use the Stratus iPad device for language translation services.
- ❖ If sign language interpreting is needed a qualified sign language interpreter is available 24/7 with Video Remote Interpreting (VRI) via an iPad device. To schedule use of the iPad device, consult the VRI Hospital Scheduling Guideline or VRI Clinic Scheduling Guideline. In addition, an on-site interpreter can also be scheduled through central scheduling at extension 8171 during business hours. During after hours, contact the staffing office at extension 8400.
- ❖ Use the TTY/TDD equipment or pen and paper until the sign language Interpreter arrives.
- ❖ If the patient had any negative comments regarding the interaction or wished to make a complaint, use the MERS system for reporting this.
- ❖ Document the use of Interpreter services in the patient medical record.
- ❖ Direct patient complaints to a Supervisor or Manager, to the Disability Communication Coordinator (Chief Compliance Officer), or to the Risk Manager.

Policy

1. Oroville Hospital will provide Interpreter services to patients who have limited English speaking ability or other language barriers, who are deaf, whose primary language is sign-language, or who may experience communication problems as a result of other disabilities free of charge to the patient or caregiver of the patient who is in need of these services.
2. Notices are prominently posted throughout the hospital stating that Interpreters are available to interpret the most common non-English languages found in Oroville Hospital's patient population. "Interpreter Available" signs are posted in English and other languages available through our contracted telephone-based Interpreter service.
3. Oroville Hospital staff members will provide Interpreter services whenever possible. A directory of contracted Interpreters is maintained by the Section 504 Office (Chief Compliance Office). This list will be updated and distributed to department managers annually. The current listings of Interpreter services will be available to employees through the OH Shortcuts – Interpreter Services folder. Whenever an appropriate staff member is not available to interpret, our contracted language Interpreter service may be accessed for Interpreter services by any member of the Hospital staff.

4. Patients who experience difficulties receiving interpretive services will be informed that they may contact a Supervisor or Manager for immediate assistance or may report complaints to the Section 504 Coordinator at 530-712-2103 or to the Risk Manager at 530-532-8648. These numbers along with “Interpreter Available” signs will be posted in the Admitting areas, Emergency Room and various public areas of Oroville Hospital, i.e. lobbies, near pay phones.
5. This policy and procedure shall be reviewed and revised in accordance with current hospital policy and whenever State or Federal regulations change. Hospital Management will participate in this review.
6. During the patient rights segment of new employee orientation, Oroville Hospital’s Chief Compliance Officer (or designee) informs new employees of our commitment and process to provide Interpreter services. Annual competency is required thereafter for all employees to ensure appropriate response to the patient’s needs. Use of the TTY-TDD equipment is considered part of the competency for all Emergency Services Department (ESD) staff.
7. Staff members will be kept up-to-date on changes in Interpreter policies by their managers on a regular basis.

Procedural Guidelines

1. Each patient’s primary language, including sign-language, will be identified at the initial patient contact/encounter. “Point to” signs are available at all these entry points to facilitate hearing and speaking impaired patients and English as a second language or limited English proficiency (ESL,LEP) patients may use the “Point to” signs illustrating the variety of other languages available through the Interpreter services via telephone. It is acceptable to use a paper and pen to document this initial discussion for the deaf or hard of hearing. Retention of this paper is essential as part of the patient’s record and must be retained in the patient’s chart as record of the discussion via alternative means to ascertain immediate needs.
2. Each patient requiring Interpreter services whether for deaf/hard of hearing or ESL/LEP or visual impairment will be asked if they choose to use their own skills, family or friends to interpret skilled in readily interpreting body parts and description of symptoms and injuries in both languages, or the hospital may provide these services free of charge utilizing our resources.
3. As soon as the need for a sign language interpreter is identified and if the patient would like the Hospital to provide interpreter services, do the following:
 - a. Locate the nearest designated iPad device and commence use of the VRI services. Utilization of the VRI should be the first service offered. If the patient declines VRI services and desires an on-site interpreter do the following:
 - i. Notify Central Scheduling at extension 8171 Monday – Friday 8am-5pm. If after hours contact the Staffing Office at extension 8400 or the employee requesting services may also view the contracted providers (found in OH Shortcuts under Interpreter Services [\ohfalcon\InterpreterServices](#)) and call those listed for immediate resource/Interpreter response.
 - ii. Use of the TTY-TDD equipment may also be utilized for immediate interpreting until an on-site interpreter can be secured. This equipment is available in the ESD and in the Staffing Office at all times.

- b. Document in the EHR the type of interpreter services that were provided and if applicable, the reference number. For example, VRI, pen and paper, family member etc.
4. If non-English language interpretation services are needed, and if the patient chooses to allow the use of the Hospital's telephone Interpreter service, the employee will use the speakerphone (including the wireless phones with speaker capabilities), or dual handset phones available on each unit to facilitate communication with the patient.
5. For persons with visual impairments: Staff will communicate the content of written materials concerning benefits, services, waivers of rights by reading them to visually impaired persons.
6. For persons with speech impairments: Staff will assist with communicating the content of the written materials concerning program services and benefits.
7. All information pertinent to outpatient encounters are to be scanned into the patient chart. Notes regarding the encounter are entered in the patient visit. All discussions with the patient asking for Interpreter services during inpatient encounters are documented in the patient medical record as "with the use of Interpreter services".
8. Interpreter services compliance may be evaluated quarterly through evaluation of any MERS associated with use of Interpreters, equipment failures reported and through QA efforts associated with contracted services evaluation which is completed annually.
9. These reports are reviewed quarterly / annually by the Section 504 Coordinator (Chief Compliance Officer) who is responsible for overseeing interpretation-related quality assurance.
10. Assistive listening devices for the hearing impaired are kept in the Staffing Office and in PBX. Any hospital staff member who identifies the need for this type of equipment should call Staffing at extension 8400.
11. This equipment may include:
 - Telephone handset amplifier
 - Telephone compatible with hearing aid
 - TTY/TDD
 - Paper and pen for writing notes
12. Staffing Office may maintain a log of all requests for assistive listening devices. This log shall record, at a minimum, date, time, patient name and equipment requested.