

Policy #: 9.2 ACCESSING INTERPRETER SERVICES	Page(s): 14
Location: Interdisciplinary Policy Manual	Revision date(s): November 2007, September 201, May 2015, Dec 2015, May 2016
Scope: Organization-wide	Effective date: 1/2000 5/2015 11/15, 12/15, 5/16
Author(s): Nancy Stern Sharon Leno	Approval signature: Carolyn Dossa/N.Shibata, Nursing
Owner/Responsible person: Sharon Leno, LCSW	Title: VP, Institutional Quality/Vice President, Nursing

TABLE OF CONTENTS

Section	Topic	Page #	Attachments/Reference	Location
Section I	Background	1		
Section II	Purpose	2		
Section III	Scope	2		
Section IV	Procedure	2 – 10		
Section V	Translation of Written Materials	10		
Section VI	Informed Consent	10		
Section VII	Law Enforcement and CPS	10		
	References and Applicable Regulatory Standards	10-11		
	Staff handout on how to access Interpreter Services	12-14		
	Language Identification Sheet	15		

I. BACKGROUND

“The conversation between doctor and the patient is the heart of the practice of medicine.”

Tumulty P. What is a clinician and what does he do? NEJM 1970; 283:20-24

“Effective communication The successful joint establishment of meaning wherein patients and health care providers exchange information, enabling patients to participate actively in their care from admission through discharge, and ensuring that the responsibilities of both patients and providers are understood. To be truly effective, communication requires a two-way process (expressive and receptive) in which messages are negotiated until the information is correctly understood by both parties. Successful communication takes place only when providers understand and integrate the information gleaned from patients, and when patients comprehend accurate, timely, complete, and unambiguous messages from providers in a way that enables them to participate responsibly in their care.” The Joint Commission 2010 publication, “A Roadmap for Hospitals.”

Any patient or family member who cannot adequately speak or understand **English (LEP Limited English Proficient)** or is Deaf or Hard of Hearing is legally entitled to a qualified medical interpreter at no cost. Procedures are established by the hospital to provide qualified medical interpreters in a timely manner to patients and families with language or communication barriers except where the patient or family after being informed of the availability of a free hospital interpreter chooses to use a family member or friend to interpret. The hospital discourages this practice due to our inability to assess language and interpreting skills. Communication may not be conveyed in both directions due to the sensitivity and/or in an effort to protect the patient/parent. A child should not be used as an interpreter, even if that is the preference of the patient/family. It is our commitment to make every effort to insure effective and timely communication between patients and providers.

II. PURPOSE

Professional healthcare interpreters help to assure high-quality healthcare by overcoming the communication and cultural barriers faced by patients/parents/legal guardians who are not fluent in English or who are Deaf or Hard of Hearing, when using health services. Communication with the assistance of a professional health care interpreter allows them to access services effectively and to be able to communicate with their health providers. By using an interpreter, the patient is able to ask questions about their recommended treatment or procedures and the risk and benefits. Use of an interpreter is considered essential to keep patients/parents updated during the day and to allow them to ask questions about their child's care. In instances where a patient or family is unable to communicate or comprehend what is being conveyed as a result of being limited or non-English speaking, Deaf or Hard of Hearing, any member of the patient team or hospital employee will arrange for an interpreter. Both health care providers and patients/parents/legal guardians have a right to request a health care interpreter.

III. SCOPE

Hospital wide including Summit, CHORI, Satellite Clinics and off campus clinics

IV. PROCEDURE

A. HOW LEP, DEAF/HARD OF HEARING PATIENTS/PARENTS/LEGAL GUARDIANS ARE INFORMED OF THEIR RIGHT TO A FREE QUALIFIED MEDICAL INTERPRETER

Patient's/Parents/Legal Guardians are informed of their right to a free qualified medical interpreter in the following ways:

- Children's Hospital staff at all points of contact are required to ask if they would like a free hospital interpreter
- Patient Rights posters are posted throughout the hospital. Signage specific to their right to an interpreter is part of that sign. Contact information for the Department of Health Services and the process for filing a complaint are included on the signage. Signs are located at the entrances to the Emergency Department, Admissions, and Outpatient/Ambulatory buildings.
- Information about accessing interpreters is found in the Family Guide given to inpatients.
- Language identification stands are located in departments and units with staff directions on back.

- Staff informs patients/parents/legal guardians of their right to a free qualified interpreter at the time appointments are scheduled, at registration, roomed and throughout their stay.

B. HOW STAFF ARE EDUCATED ABOUT OUR PATIENT'S RIGHT TO A FREE QUALIFIED MEDICAL INTERPRETER

- The Interpreter Services policy is located on the Novell desktop in the Interpreter Services icon
- The right to an interpreter is covered in NHO (New Hire Orientation) and GNO (General Nursing Orientation)
- New residents and other interns either attend a training on who is qualified to interpret and working with and accessing interpreters.
- During the annual Patient Safety Fair Interpreter Services is reviewed at the Patient Rights booth.
- Interpreter Services is covered in the annual Healthcare Learning module that all employees have to complete.
- Through the use of Newsletters and Global Emails

C. WHO MAY INTERPRET

Interpreting is a professional skill. Fluency in a language other than English does not imply the ability to interpret at a professional level. Health care interpreters are professionally trained interpreters and abide by a professional Code of Ethics and Standards of Practice. Health care interpreters are to be used in all health care situations where communication is essential (See section E.) A distinction must be made between staff who are bilingual and staff who are professional interpreters. Healthcare interpreters should be regarded as an integral member of the multidisciplinary health care team. The following are individuals qualified to interpret:

- Staff Interpreters
- Contracted agency interpreters
- Bilingual Staff who have received a certificate of completion of a CHO training or other training approved by the Manager of Interpreter Services (NOT CCLA/QBS)
- A person identified by a parent/legal guardian only if that parent/legal guardian has been offered a free qualified hospital interpreter and they decline. Please make every effort to discourage this due to the risk of editing, omitting or changing what is being said to either party. Encourage the use of a professional interpreter and explain you are obliged to ensure that all communication is accurate and impartial, that all communication will be confidential and privacy will not be breached if an interpreter is used

D. QUALIFIED BILINGUAL HEALTHCARE PROVIDERS-LANGUAGE TESTING

Bi-lingual staff are required to have their language skills validated if they are using them to engage in the language of service while providing medical care for patients and families. UCSF Benioff Children's Hospital Oakland offers cultural and linguistic assessments through ALTA testing services. The two tests provided are the Clinician Cultural & Linguistic Assessment (CCLA) and the Qualified Bilingual Staff (QBS) assessment. The CCLA is for Physicians and Nurse Practitioners, while the QBS is designed for other medical staff. Clinicians and staff who obtain a passing score on one of these assessments may engage in the validated language of service with patients, patients' family members and caregivers without the use of an approved Medical Interpreter. Validated Bi-lingual staff may not act as Medical Interpreters for third parties and must use a Medical Interpreter if requested by the patient and/or family. Interpreting Services maintains a list of all currently qualified clinicians and staff. Staff must contact the Manager of Interpreter Services in order to register for the test to have their language skills validated. Staff that **do not** have their language skills validated must continue to use a Medical Interpreter, either phone or in-person. Staff that use the language of service for customer service related, non-medical purposes, are exempt from the validation requirement.

Providers should refrain from attempting to communicate directly with their patients in another language if they are not native and/or fluent speakers of the target language and have not had their proficiency with medical terminology in that language certified. It is a patient's right to have effective communication through the use of qualified interpreters.

E. ESSENTIAL TIMES WHEN QUALIFIED INTERPRETER SHOULD BE USED, INCLUDING BUT NOT LIMITED TO THIS LIST:

- Triage
- Medical Histories, H & Ps and assessments
- Admission/initial assessments
- Explaining diagnosis and medical treatment plan
- Consents for surgery, procedures, surgical interventions
- Time outs - Identifying correct patient, correct procedure and correct site
- Change in patient status or treatment
- High-risk/life-threatening situations
- End of Life/Palliative/Care/Bereavement counseling
- Death of a patient/Bereavement support
- Family Conferences
- Discharge plans and instructions
- Updates
- Explanation of medications and potential side effects
- Surgery including pre-operative and post-operative instructions
- Patient care education including teach back
- Psychiatric/Psychological assessment and treatment
- Rule out abuse (With UCSF Benioff Children's Hospital Oakland staff only)
- Procedures relating to organ / tissue donation

F. DOCUMENTING PATIENT'S PREFERRED LANGUAGE FOR DISCUSSING HEALTHCARE

It is the responsibility of the provider, staff member or intake staff to establish and document in the medical record, the patient/family's preferred language for discussing healthcare. UCSF Benioff Children's Hospital Oakland utilizes the EMR system known as EPIC and enters the preferred language into the EMR. Both inpatients and outpatients have their preferred language displayed for all appointments/procedures within EPIC, and this information is sent to the Interpreter Services Department to help facilitate Interpreters when needed.

All instances where a Medical Interpreter has been utilized (in-person, video, telephone) staff are required to document the name and/or ID number of the Interpreter. If an agency or telephone Interpreter were used then the company name should be documented as well. All documentation of Interpreter usage is part of the patients medical record and must be documented in the hospital's EMR (EPIC).

Qualified Bi-lingual Staff must document in the EMR (EPIC) that they are qualified to speak in the patients preferred language when they engage in medical communication with the patient and family.

G. STEPS FOR ACCESSING INTERPRETERS

An interpreter will be provided when the patient (after being informed of their right to a free hospital interpreter) or healthcare provider or staff requests the use of a professional interpreter, An interpreter will be provided even if the health care professional does not consider one is necessary.



Full updated instructions are found in this Icon on the Novell Desktop

1.) Regular business hours Monday – Friday

SPANISH Monday – Thursday 6:30 am – 8:30 am Friday 7:30 am – 8:30 am

Pager 2000 Primary coverage OR/PACU may be available hospitalwide for emergent needs.

Monday – Friday, 8am-5:30pm → **ALL LANGUAGES including sign language**, call dispatch desk ext. 4542 or 5292. Emergency Room may also use ext. 5228. If no one answers please leave a complete message with your name phone/pager number(s), location of patient, amount of time needed. Messages are checked continuously and you should be called back within 15 minutes. You will be advised if we are able to provide a face to face interpreter or if we need to direct you to use a phone interpreter. Inpatients, Emergency Room, OR and Recovery room are priorities for face to face interpreters.

EMERGENCY NEEDS during regular business hours

In the event of an emergency call ext 4542 or pager 8339. Please advise the nature of the emergency e.g. death, change of patient status, code, trauma etc. a staff interpreter will be sent. In the event that a staff interpreter has to be pulled from an appointment the previous provider may be directed to use a phone interpreter to finish the appointment. The following are considered emergencies:

Trauma or Med Stat

Code Blue

Emergent Family Conference for Critically ill child

Change of patient status

Death

Emergency Medical consent

Rule out Child sexual or physical abuse

Patient/Parent psychosocial crisis e.g. 5150, Code Gray

2.) After hours and weekends/holidays

SPANISH ONLY Monday – Friday, 5pm-1:30am; Sat & Sun 1:30pm-10:00pm → Ext 5228 (ED) pager 2238 (rest of hospital) – (Interpreter must prioritize ED, your page will be returned when the interpreter is free). If you are unable to wait and your **need** is urgent, please use Cyracom.

OTHER SPOKEN LANGUAGES Go directly to Cyracom

Cyracom

From within the main hospital and outpatient center locations dial ext. 4444 to reach a telephone Interpreter. From satellite clinics please call 1-844-791-3129 and enter your site location PIN code. If you do not know your site location PIN code, please contact your locations Practice Manager.

Back up ONLY IF Cyracom does not have the language or if there is a problem with getting through to Cyracom

Please use Pacific Interpreters 1-800-870-1069 access code 1002

If neither Cyracom or Pacific Interpreters is not available call IEC 1(800)292-9246 or (415)788-4149 (only certain languages may be available)

NOTE: Face to face other language interpreters may be available for urgent/crisis needs only, including Spanish should the staff Spanish interpreter call in sick . Please call IEC. (415)595-3417 or (415)637-0608



SIGN LANGUAGE- Interpreter options available

1) All after hours/weekend needs call → IEC (415)595-3417 or (415)637-0608. Please call as soon as you are aware of the patient/parent need/request

2) Video Relay Interpreter- Portable Cyracom VRI systems are located in the Emergency Department and available for ASL 24/7.

H. DEAF OR HARD OF HEARING AUXILIARY AIDS AND SERVICES

A consumer who is deaf could be the patient, a relative or companion who is involved in the patient's health care. Not all deaf individuals will use the same method of communication. Assess the best method for Communication by asking your patient about their preference. Put in a request immediately for a sign language interpreter to avoid delays. There are various specialties of sign language interpreting including oral interpreting for deaf or hard of hearing persons who lip-read instead of sign, tactile signing, which is interpreting for persons who are blind as well as deaf by conveying signs into a person's hands; cued speech; and signing exact English.

Most deaf people communicate through a combination of methods such as signing, writing, speech, and lip reading.

For speech or lip reading, Use your regular voice volume and lip movement. Make sure that you have the patient/parent's attention before speaking.

For writing be prepared to allow for increased time and be aware that it can result in incomplete communication because it is fatiguing and time-consuming. Also, American Sign Language ASL has its own grammatical rules, sentence structure and cultural nuances.

Please refer to the Visual, Hearing, and Other Assistive Needs Request in the Interpreter Services icon. An international deafness symbol can be printed and used/posted ONLY if a parent wants to do this. Do not post unless you have discussed this with them.

The hospital emergency TTY phone number is (510)428-3141 and is located in the Emergency Room.

Should a staff person or patient/family require the use of TTY/TDD equipment, one is located in the emergency room, ICU, OPC OR and most inpatient units. The Operators have a loaner TTY phone. Please refer to the Interpreter Services icon on Novell for instructions on using TTY phones. For additional opportunities for communication you can call the California Relay Service (711). Give them the full phone number of the TTY phone including the extension and remind them to press the # sign. You and the Deaf/Hard of Hearing individual can communicate via this mode. This would allow for additional opportunities for effective communication when there is no ASL interpreter on site. These phones must be plugged into an analog line as in the patient's rooms. If staff is aware ahead of time of a patient's arrival date and time, equipment can be set up in advance. To contact families at home use 711 from a regular phone (California Relay Service). Families may call in using this service or a video relay

service. Please inquire with the Sign Language interpreter which service they use and document in EPIC.

Closed Captioning on tvs – Please refer to the instruction sheet for turning closed captions on and off in the Interpreter Services Novell icon under Assistive Aides.

I. FACE TO FACE OR PHONE INTERPRETER

Face to face interpreters are able to observe and raise issues indicated by demeanor or body language from the patient - an especially critical ability when sensitive information is being communicated.

Telephone interpretation may be appropriate for nonclinical interactions, emergency situations when waiting for an in-person interpreter may compromise patient outcomes, or situations requiring very uncommon languages. Telephonic interpreting does not allow for interpretation of non-verbal forms of communication such as body language and gestures. It may also be easier to misunderstand what is said or not heard clearly over the telephone.

J. VIDEO RELAY INTERPRETER (VRI)

Due to the increasing need for Medical Interpreters throughout the continuum of care, UCSF Benioff Children's Hospital Oakland now has limited VRI available in select locations within the hospital. Cyacom provides a VRI, giving staff and patient immediate access to a Medical Interpreter. Currently we have 5 languages offered 24/7 (Spanish, ASL, Arabic, Cantonese, Mandarin) with 15 others available M-F 8-5pm (PST). 2 mobile IPAD carts are located in the Emergency Room, and camera systems are installed on workstations in Walnut Creek and OPC-Med/Sub. Expansion is forthcoming and all requests for VRI in other locations than those listed above should be communicated with the Manager of Interpreter Services.

K. COMPLETION OF FORMS/QUESTIONNAIRES

Health care providers are required to be present when health care interpreters provide interpreting assistance to complete forms and questionnaires.

L. SIGHT TRANSLATION

Sight translation essential to the health care of an individual patient must take place in the presence of a health care provider. The translation of lengthy and technically complex documents may require extra time and resources.

M. USE OF INTERNET OR MOBILE APPLICATIONS FOR COMMUNICATING WITH PATIENTS (MediBabble, Babelfish, Goggle Translate, NFluent etc.)

Mobile applications and/or automated translations such as **Babelfish, Goggle Translate, NFluent etc.** are to be avoided due to lack of reliability and quality. Machine translations do not have certified or trained translators overseeing what is produced, therefore there is no opportunity to correct errors. This can lead to serious misunderstandings and adverse consequences.

UCSF experts in the field of cross-cultural communication, language barriers and medical interpretation have reviewed these unidirectional tools in order to understand their utility and develop guidelines for use in our hospitals and clinics. As a medical center that cares for a high percentage of patients who speak limited English, we have developed the following guidelines on the use of these applications.

- Providers should continue to arrange for trained medical interpreters for patient, either in person or via telephone
- UCSF Benioff Children's Hospital Oakland requires the use of trained medical Interpreters to be used in all clinical encounters with patients with limited English proficiency.

Generally, use of unidirectional communication tools at our medical center **should be limited to non-clinical encounters** (e.g. "I am here to change your linens.") or to informing patients that you will be obtaining an interpreter.

These recommendations for limited clinical use of this application are based on the following concerns:

- Use of unidirectional communication tools may be appropriate in settings where there is no other available method of communication between a clinician and a patient who do not speak the same language, for example in **disaster relief**.
- Unilateral communication is not patient centered and may jeopardize patient safety.
- Effective clinical care requires bidirectional patient communication. This includes the ability to engage the patient, elicit concerns and questions, explain risks and benefits, obtain informed consent, and negotiate treatment.
- Relying on technology that does not allow unscripted communication may give clinicians a false sense that they have an accurate and complete assessment of the patient.
- Without the ability for the patient to redirect or correct the clinician, patient safety may be jeopardized. For example, even in controlled settings like the operating room, having the patient be able to notify the team if the wrong part of the body is being prepped is critical.

N. IN PATIENT NEEDS INCLUDING DISCHARGE TEACHING/INSTRUCTIONS, EDUCATION, AND FAMILY CONFERENCES

For patients requiring patient education teaching, discharge instructions or a family conference it is of utmost importance that interpreter services be booked in advance, as soon as possible. For future needs please send a request through the hospital's established email communication system. Interpreter Services makes every effort to accommodate the requested date/time, however it is highly recommended to request with a window of available time. For same day unanticipated needs please call ext. 4542/5292 or urgently page 8339. For after hours needs refer to section G2.

O. FUTURE OUTPATIENT APPOINTMENTS INCLUDING SURGERIES

When scheduling each appointment ask the parent/provider if an interpreter will be needed. Enter the language and Y (yes) for interpreter in the scheduling module.

P. CANCELLATION, CHANGES or ADD ON APPOINTMENTS

Should a patient, department or clinic cancel, change OR add on an appointment be sure to request an interpreter for the changed appointment. In order to avoid full cancellation charges for other language interpreters please call 48 business hours ahead. For any same day or following day cancellation, change or add on appointments call dispatch at ext 4542 or 5292. Face to face interpreters cannot be guaranteed for last minute add ons. Every effort is made to locate Sign Language and other language interpreters in a timely manner. **If we are unable to confirm a face to face interpreter for other languages you will be referred to Cyracom for a phone interpreter.**

Q. CONFERENCE CALL INSTRUCTIONS

1) For all languages, Cyacom telephone interpreting can assist with conference calls either from a blue Cyacom clearlink dual handset phone or from any landline within the hospital. From a landline phone call x 4444 and follow the prompts. You will be asked if you want to “add a third party” which you will state “yes”, and then you will be prompted to enter the phone number of the party you wish to connect to. When the Cyacom Interpreter is on the telephone, he/she will restate the number to ensure accuracy and the Interpreter will place the call to the third party.

2) For Spanish, The Interpreter Services office, when open from M-F 8-5:30pm, will be happy to assist you with making a conference call.

** If you receive an outside call from a person needing language assistance please follow these steps:

- With the parent on the line, press “conf” button.
You will hear a dial tone. Dial either x 4542 for an in-house Spanish Interpreter or x 4444 for a Cyacom Interpreter
- When the Interpreter is on the line, press “connect” and you will be connected with your party and the Interpreter.

**Spectralink phones can set up conference calls by simply pressing “FCN”- Option #3 Conf- then

entering

extension 4542 or 5292 (Dispatch) or Cyacom at ext 4444. When the interpreter answers press FCN again and Option #3. All parties will be connected. _

Phones should be programmed with speed dial to Dispatch and Cyacom. If using the speakerphone option you may call or speed dial either dispatch or Cyacom. Conference calling is not necessary.

SPEAKERPHONES LOCATIONS AND INSTRUCTIONS

Most clinic phones have speakerphones including the Social Work office in the Emergency Department, Safe Team Exam Room in EDII, ICU, ICN, 4 Medical and 5 South conference rooms. Departments with cordless or dual handle phones and newer Spectralink phones also have speakerphones. The operators and Interpreter Services have loaner dual handle phones which have a speakerphone capacity. Do not lift up handset, press hands free button; you will hear a dial tone. Dial Interpreter Services or Cyacom. For conferences in patient rooms or a room with an analog line Polycom Voicestation 300s are available through Interpreter Services. Please refer to the Interpreter Services icon on Novell for instructions on using this equipment. They may be used in patient rooms by replacing the standard phone. Any loaner equipment must be returned to Interpreter Services or the operators when patient is discharged or at the end of their appointment.

S. CHARTING RESPONSIBILITIES

The provider using an interpreter must document the name of the interpreter, language, date of service and nature of interpretation. (See VII), However, should a patient/parent/legal guardian after being

informed of their right to a free qualified hospital interpreter choose to use a family member or another person the provider must document the declination of our free service. Additionally document the name of the person used and their relationship to the patient

T. PHONE CALLS

Providers needing assistance in making phone calls or for incoming calls please call/conference Interpreter Services at ext. 4542 or 5292 Monday - Friday 8:00 - 5:30. If your need is emergent and no one is available please conference call Cyracom at x 4444. If you are forwarding a message for us to listen to and to interpret, **please forward the message to ext. 5292**. Interpreter Services will call you with the interpreted message in English. If you have a caller on the line, conference call interpreters services for assistance.

U. TRANSLATION OF WRITTEN MATERIALS

All documents needing to be translated must be reviewed or requested through the Interpreter Services Department to ensure accuracy. All EPIC personal Smartphrases should be translated by Interpreter Services before being placed within EPIC for use. Common vital documents should be translated into the top languages of patients receiving care at the hospital. Requests for translations should be sent as an attachment to the Manager of Interpreter Services via the hospital's established email system. Upon review an estimate of time and cost will be forwarded back for approval before the actual translation is done. A Certificate of Accuracy will accompany the final translation. Interpreter Services will submit the invoice for payment. Onsite interpreters can usually provide short written translations such as discharge instruction.

V. INFORMED CONSENTS

It is imperative that a professional interpreter is present to ensure patient consent is valid and that the patient has understood the information provided when a recommendation for surgery, treatment or research is communicated to a person who is not fluent in English or who is Deaf/Hard of Hearing. In order to assure that both the interpreter and the patient clearly understand the information, it is strongly recommended that the document be read to the patient by the provider. If the interpreter is requested to "sight translate" the document, active interaction with the provider is required. Consent forms should be translated into the top languages served by the hospital.

W. LAW ENFORCEMENT AND CPS

The above outside agencies are responsible for providing their own interpreters.

References:

- 1. California Standards for Healthcare Interpreters (CHIA) Ethical Principles, Protocols, and Guidance on Roles & Intervention 2002**
- 2. National Council on Interpretation in Healthcare (NCIHC) National Code of Ethics adopted July 2004, National Standards of Practice adopted September 2005**
- 3. International Medical Interpreter Association (IMIA) Code of Ethics established 1987, revised 2006, Medical Interpreting Standards adopted October 1995**
- 4. American Translators Association (ATA) Code of Ethics and Professional Practice**
- 5. NAD (National Association of the Deaf)-RID (Registry of Interpreters for the Deaf) Code of Professional Conduct**

6. American Medical Association published Guide to Communicating with LEP Patients

Applicable and Regulatory Standards:

Title VI of the Civil Rights Act of 1964 (42U.S.C. § 2000d); 45 CFR80.3 (b) (2);
 Executive Order 13166 (8/11/00); US Department of Health and Human Services Guidance
 (68 Fed. Reg. 47311 (8/8/03)).
 The Americans with Disabilities Act, 42 U.S.C. §12101, et seq. (ADA), Section 504 of the
 Rehabilitation Act 29 U.S.C. §794 et seq.,
 CMS – Conditions of Participation; Patient Rights Federal Register Volume 76, No22
 Wednesday, February 2, 2011 Proposed Rules
 CA Health & Safety Code § 1259 (Kopp Act 1983)
 CA Government Code §§ 11135-11139;22 CA Code of Regulations §98000 et seq.
 Federal Medicaid/SCHIP Managed Care Contract
 Emergency Medical Treatment and Active Labor Act/Patient Anti-dumping Act
 2010 Patient Protection and Affordable Care Act (ACA) Section 1557 and 4302
 SB853 (Escutia); Health Plans
 CLAS Standards National Standards for Culturally and Linguistically Appropriate Services in
 Health Care
 Dymally-Alatorre
 Medi-Cal Contracts
 Healthy Family Contracts
 The Joint Commission

Approval Process:	Committee/Legal	Approved
10/07	Patient Rights Committee	yes
10/6/11	Patient Rights Committee	yes
5/7/15	Patient Rights Committee	yes
5/6/16	Patient Rights Committee	yes

Distribution:

Interpreter Services Instructions – A patient/family's right



Full updated instructions are found in this Icon on the Novell Desktop

Regular business hours Monday – Friday Always try in-house interpreters **FIRST**

Monday – Thursday **Spanish** 6:30 am – 8:30 am Friday **Spanish** 7:30 am – 8:30 am

Pager 2000 Primary coverage OR/PACU may be available hospitalwide for emergent needs.

Monday – Friday, 8am-5:30pm → all languages, call dispatch desk ext. 4542 or 5292. Emergency Room may also use ext. 5228. If no one answers please leave a complete message with your name phone/pager number(s), location of patient, amount of time needed. Messages are checked continuously and you will be called back as quickly as possible. If it is an emergency page 7894

After hours and weekends/holidays

Monday – Friday, 5pm-1:30am; Sat & Sun 1:30pm-10:00pm → page 2238 – **SPANISH ONLY**

(Interpreter must prioritize ED, your page will be returned when the interpreter is free). If your **need** is urgent, please use Pacific Interpreters.

OTHER SPOKEN LANGUAGE NEEDS Go directly to Cyracom.

NOTE: Face to face other language interpreters may be available for **urgent/crisis needs only, including Spanish should the staff Spanish interpreter call in sick** . Please call IEC. (415)595-3417 or (415)637-0608.

Primary phone agency

Cyracom

From any hospital phone call X 4444. For Satellite locations that do not have access to the hospital's internal phone network, call 1-844-791-3129 w/ PIN code. Each Satellite location has a designated PIN code. Please see the onsite Manager for your PIN code.

Back up ONLY IF Cyracom does not have the language:

Use Pacific Interpreters at 1(800) 871-1069 access code 1002



For all after hours/weekend needs for **Sign Language you have 2 options:**

1) Call → IEC (800)292-9246 or (415)637-0608 for an in-person Interpreter

Please call as soon as you are aware of the patient/parent need/request .

Please make arrangements with the agency for an interpreter to return that is a mutually agreeable time when the parents and team will be available and notify the Interpreter Services department at x 5292 by leaving a message as to the date/time of this arrangement.

2) Cyracom portable VRI machines are available for 24/7 ASL assistance in the Emergency Room.

TTY phones are available in the ICU in the upper cabinet behind the Charge nurse's desk, at Summit and in the Emergency Room. They need to be plugged into an analog line. Please see instructions in the TTY Conference speakerphone instructions folder. There is an additional loaner phone with the operators.

SPEAKERPHONES LOCATIONS AND INSTRUCTIONS

Most clinic phones have speakerphones including the Social Work office in the Emergency Department, Safe Team Exam Room in EDII, ICU, ICN, 4 Medical and 5 South conference rooms. Departments with cordless or dual handle phones and newer Spectralink phones have speakerphones.

Do not lift up handset, press hands free button; you will hear a dial tone. Dial Interpreter Services or Pacific Interpreters. Second handsets and splitters are also available through Interpreter Services. For conferences in patient rooms or a room with an analog line Polycom Voicestation 300s are available through Interpreter Services. They may be used in patient rooms by replacing the standard phone. Any loaner equipment must be returned to interpreter services when patient is discharged or at the end of their appointment.

Conference Call Instructions

Conference calls with an Interpreter can be set up in 2 ways.

- 3) For all languages, Cyracom telephone interpreting can assist with conference calls either from a blue Cyracom clearlink phone or from any landline within the hospital. From a landline phone call x 4444 and follow the prompts. You will be asked if you want to "add a third party" which you will state "yes", and then you will be prompted to enter the phone number of the party you wish to connect to. When the Cyracom Interpreter is on the telephone, he/she will restate the number to ensure accuracy and the Interpreter will place the call to the third party.
- 4) For Spanish, The Interpreter Services office, when open from M-F 8-5:30pm, will be happy to assist you with making a conference call.

** If you receive an outside call from a person needing language assistance please follow these steps:

- With the parent on the line, press "conf" button.
- You will hear a dial tone. Dial either x 4542 for an in-house Spanish Interpreter or x 4444 for a Cyracom Interpreter
- When the Interpreter is on the line, press "connect" and you will be connected with your party and the Interpreter.

TTY/TDD Phones for the Deaf/Hard of Hearing

There are TTY phones located in the Emergency Room and at the Ward Clerk's station in the ICU. The hospital emergency TTY phone number is (510)428-3141. In addition the operators have a loaner. These phones must be plugged into an analog line as in the patient's rooms. Use 9-711 from a regular phone to call families at home via the California Relay Service or to call them at the hospital TTY please be prepared to give them the full number and remind them to press # if entering an extension. Families may call in using the service. You can transfer this call to the provider directly because the parent and interpreter are already on the line. Many deaf families use text messaging and email to communicate. Please discuss communication preferences and cell phone use with the patient/parents and a sign language interpreter. Please refer to the Visual, Hearing, and Other Assistive Needs Request and BBQ located in the Novell Interpreter icon in the Assistive Aides folder.

Always document the name or ID # of the interpreter in EPIC.

