

MEMORIAL HEALTHCARE SYSTEM

STANDARD PRACTICE

Date: February 1996

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Title: **PATIENTS WITH SPECIAL COMMUNICATION NEEDS**

Purpose: To comply with the requirements of the Office of Civil Rights, the Office of Minority Health and The Joint Commission, Memorial Healthcare System (MHS) adopts the procedures specified below for effectively communicating in the language of the predominant population group(s) served by MHS, and, as needed, with patients and/or family members who have a hearing loss, are deaf, speech impaired, non-verbal or have a cognitive/developmental disability or have limited English proficiency (LEP) skills. MHS will provide interpreters for patients and families who are Deaf or Hard of Hearing and use American Sign Language or have LES skills at no cost to the patient or family.

Definitions:

Interpreter – An individual who is fluent in at least two languages and has documented training in converting one spoken or signed language to another spoken or signed language.

- **Contracted Interpreter** - Outside vendor. Vendor is responsible for training and assessment of interpreters and maintaining competence of interpreter.
- **Trained Bilingual Employee/Volunteer Interpreter** - Primary responsibility is in healthcare. Interpreting is secondary. Employee has been trained and evaluated and deemed competent in interpreting skills, ethics and medical terminology. Volunteers who have been trained and deemed competent in interpreting skills, ethics and medical terminology may also be used as a trained bilingual volunteer interpreter.

Non-trained Bilingual Employee/Volunteer - MHS employees/volunteers who are bilingual and can communicate directly with the patient/family in the patient's preferred language without the need for an interpreter. These individuals have not been trained to be an Interpreter. This individual may only act as an interpreter in an emergency situation when immediate communication is needed.

Procedure:

1. It is MHS's goal that patients and families with limited ability to communicate in English shall be provided effective communication in their preferred language. MHS employees/physicians who are bilingual can communicate directly with the patient/family in the patient's preferred/learned language without the need for an interpreter. If the healthcare provider is not able to communicate in the patient's preferred language, a MHS contracted vendor interpreter will be used in medical interactions with the partnership of the patient and family.

Options:

Over-the-Phone Interpreting Vendors

- CyraCom - Use one of their blue dual handset or blue cordless phones to access an over-the-phone interpreter for spoken foreign languages. If not available, dial X652121 from any CISCO phone. Enter your six digit extension and follow the prompts to access CyraCom over-the-phone interpreters.

Video Interpreting Service (VIS) Vendor

- CyraCom Video Interpreting – Use designated CyraCom IPADs or the CyraCom app which is available throughout the healthcare system for video or audio interpreting. If language not available, use CyraCom over-the-phone interpreting service. If there are any issues, please contact customer support at 1-800- 481-3289.
2. MHS also has staff trained bilingual as volunteer interpreters who can be used in medical interactions with the partnership of the patient and family.
 3. When there is a medical emergency and an immediate need for an Interpreter any available non-trained bilingual employee or volunteer may be used when there is not a trained bilingual employee or volunteer interpreter available and over-the-phone or video interpreting service is not an effective modality.
 4. Family members should not be used as interpreters, except when there is no reasonable alternative, such as in emergency circumstances, or when requested by a competent patient if the patient refuses interpreter services. Minors should not be used as interpreters.
 5. If the physicians, staff or the patient/family deems the communication to be ineffective with a vendor stop the interpretation and request a different interpreter or use a different vendor. Additionally, submit a complaint to the appropriate vendor and to the office of Diversity, Equity, and Inclusion for investigation and follow-up. If the complaint is with a trained bilingual Memorial representative stop the interpretation and request a different interpreter and submit a complaint to the Administrative Officer at that facility for investigation and follow-up.
 6. MHS has accommodations available for patients and/or family members who have hearing loss, are deaf, speech impaired, nonverbal, have a cognitive/developmental disability or have a physical or mobility impairment.
 - a. Employees are expected to offer accommodations/adaptations to patients and/or family members, who have a hearing loss, are deaf, speech impaired, nonverbal, have a cognitive/developmental disability or have a physical or mobility impairment rather than wait for them to make the request.
 - b. As soon as the patient and/or family members are identified as being deaf or hard of hearing and uses American Sign Language, an interpreter will be offered through the video interpreting service (VIS) and/or on-site interpreters.
 - c. MHS has contracted with a wireless VIS provider who provides certified American Sign Language sign language interpreters 24 hours a day, to patients/families who use American Sign Language for effective communication. VIS may be used to assist with effective communication until the arrival of the on-site sign language interpreter or may be

used in place of an on-site sign language interpreter if the patient/family member requests. VIS is an alternative means of providing sign language interpreters in a timely manner. The VIS provider also offers video interpreters for a limited number of spoken foreign languages for our patients and families with LEP skills and additional languages via audio. If a patient requests an in-person ASL interpreter instead of a video interpreter, a reasonable attempt will be made to honor the request.

- d. When the patient and/or family needs an American Sign Language interpreter to come to the hospital MHS has partnered with CODA Link, Inc to provide American Sign Language interpreters.

CODA Link, Inc
 (954) 423-6893 Office Hours 8:30 a.m. – 5:00 p.m.
 (954) 557-5166 24 Hour Emergency

MHS pays a fee for American Sign Language services and arrangements should be made in advance. If not needed, these services should be cancelled within a 36-hour notice in order for fees not to be assessed.

- e. Special communication telephones are available 24 hours/day seven days a week and are located in the Telecommunications office at MRH/JDCH, MRHS, MHP, MHW and MHM.

Special communication telephones include the following:

- TTY Phones
- Amplified Phones
- Voice Carry Over Phones
- Big Button Braille Phones

- f. Staff/patients/families/visitors may call the Florida Relay Service at 711 or use the appropriate toll free number. This is a fee service that relays calls between deaf or speech impaired and hearing persons. A person who is deaf can have the use of a TTY phone to access this service.

- 1-800-955-8771 (TTY)
- 1-877-955-8773 (Spanish)
- 1-877-955-8707 (French)
- 1-877-955-8260 (Voice Carry Over)
- 1-877-955-5334 (Speech to Speech)
- 1-800-955-8770 (Voice)

- g. All patient televisions have access to closed captioning.

- h. Special nurse call systems are available 24 hours/day and 365 days/year and accessible through Facilities Management at MRH, JDCH, MRHS, MHP, MHW and MHM. Special nurse call systems include the following:

- Pressure Pad Call System
- Bulb Call System
- Breath Call/Sip and Puff Call System
- EZ Call System
- Geriatric/Mechanical Pad Call System

- i. For additional support with patient communication, consult speech therapy at your hospital.

STAFF Training

Staff is provided information through several mediums on the availability of these services through new employee orientation and nursing orientation within 60 days of hire; and mandatory annual review.

Information may be found on the INTRANET. If there still is a need for additional assistance or guidance, staff/patients/families/visitors may contact the nursing supervisor at each facility or the Diversity, Equity, & Inclusion Consultant, Office of Diversity, Equity, and Inclusion at (954) 276-1179 or DEI@MHS.NET.



K. Scott Wester, FACHE
President and Chief Executive Officer

This policy is intended to provide Memorial health care professionals with guidelines for addressing the subject matter herein. This policy is not meant to be a substitute for the standard of care or to restrain professional judgment or opinion.