TITLE: *Communication: for Blind, Deaf, Hearing, or Learning Impaired*

**I. Purpose/Expected Outcome:**

A. To assist and provide appropriate communication for patients and patient’s surrogates who have barriers to communicate.

B. Patients with visual, hearing, or language barriers will be provided an equal opportunity to participate in and to benefit from hospital services.

**II. Definitions:**

A. **Surrogate:** One appointed to act in place of another.

B. **TDD:** Telephone Device of the Deaf

C. **Qualified Interpreter:** for the purposes of this policy, is an employee who has been approved by the hospital and shown proficiency as an interpreter in language translation dealing with medical issues.

**III. Policy:**

A. Performed by any hospital personnel interacting with a visual, hearing, language, learning impaired or where the patient lacks decision-making capacity, with a visual, hearing, or language barrier surrogate decision-maker “surrogate”.

B. Patients and surrogates with hearing/vision/language barriers will be ensured a means of communication with physicians and staff members involved in their care.

C. Patients are offered the services of an interpreter even if adequate communication abilities are demonstrated.

D. When an employee is not a “qualified interpreter” the employee shall only provide services until a “qualified interpreter” arrives as requested by the patient. Such communication shall occur through the use of appropriate bilingual staff, language line, or hearing impaired services.

E. The hospital prohibits the use of family members or friends as interpreters unless the patient requests to do so after being informed that the hospital will provide a competent interpreter.

1. When staff has reason to believe that a person’s preferred interpreter is not providing effective communication between hospital staff and the patient, the hospital shall provide interpreter services.

2. The hospital prohibits the use of minors (under the age of 18 years) as interpreters.

F. The Department Director will authorize payment for the use of contracted services for the purposes of translation.
G. Outgoing communication and instruction related to the health care needs is provided in the patient’s primary language.

IV. Procedure/Interventions:

A. General Guidelines:
1. Identify blind/visually impaired, or hearing impaired.
2. Offer the services of an interpreter even though adequate communication abilities are demonstrated. (NURSING STAFF)
   a. Indicate in the patient’s record that an offer of an interpreter was made and declined and enter the name of the person serving as an interpreter at the patient’s request.
3. Utilize the patient’s preferred method of communication in all situations where effective communication is necessary to ensure that the visually, hearing, and language barrier patient receive equal services, and equal opportunity to participate in and to benefit from hospital services. These situations include but are not limited to:
   a. Emergency situations that arise;
   b. Obtaining the patient’s medical history;
   c. Obtaining informed consent or permission for treatment;
   d. Diagnosis of the complaint or injury;
   e. Explanations of medical procedures to be performed;
   f. Treatment, when the patient is conscious;
   g. In the post-anesthesia care unit after surgery;
   h. Those times the patient is in the critical care or in the post-anesthesia care unit after surgery;
   i. Explanations of the medications prescribed, how and when they are to be taken and possible side effect;
   j. Counseling;
   k. Patient education;
   l. Assisting with communication at the request of the physician or other hospital staff members; and
   m. Discharge of the patient regarding medications and home treatment.
4. Contact the Telephone Operator for a list of possibly available hospital interpreters.
5. Utilize other methods of communication whenever the patient’s/surrogate preferred method of communication is believed by staff to be insufficient for effective communication.
   a. Use a qualified interpreter to translate clinical information to the patient/family/visitor.
   b. Call to obtain a qualified interpreter to provide translation for the patient.

Utilize Translation Telephone:
1) Provide one handset telephone receiver to the patient and the other for staff to speak to the interpreter.
2) Press access key located at the top left hand side of the telephone, this will speed dial to the translator.
3) Press the account # key located to the right of the access key when prompted. This will automatically enter the Abrazo Central Campus provider number.
4) Select a language using the language code, spelling of the language, or through operator assistance.
5) Verify that the selected language is correct.
6) Hold for translator assisted conference.
7) Document in the patient’s medical record that the translation telephone was used. Note the operator’s name, number, and the time and length of the call.
6. Place a sign on the patient’s bedside to remind all caregivers of the patient’s/surrogate’s impairment, with the patient’s permission (i.e., Patient is Deaf/Hard of Hearing/Blind/Visually Impaired).
7. Treat all conversations between patient/surrogate and staff as confidential. (INTERPRETER)

**B. Hearing Impaired Patients/Surrogates Communication:**

1. Assemble Equipment (Note: Telephone equipment is obtained from Hospital Telephone Operators): (NURSING STAFF)
   a. Telephone with an amplifier and telephones compatible with hearing aids equipped with a telephone coil; or
   b. Telephone Device of the Deaf (TDD); or
   c. Close caption television.

2. Ascertain the preferred method of communication:
   a. Assisted listening devices;
   b. Lip reading;
   c. Hand written notes;
   d. Use of qualified sign language and/or oral interpreter; or
   e. Any combination of the above.

3. Communication with hospital healthcare personnel:
   a. Utilize other methods of communication whenever the patients/surrogates preferred method of communication is believed to be insufficient.
   b. Review the translator list of employees who provide sign language and/or interpret.
   c. Obtain authorization to call a translator service from the Department Director, to access and utilize a professional interpreter as needed for the patient/surrogate.
   d. Place call to contact “Valley Center for the Deaf”: (HOUSE SUPERVISOR/DESIGNEE)
      1) Day time 8 am to 5pm – Monday through Friday except holidays at 602-267-1921.
      2) After hours, nights, for emergency interpreters call 480-303-1305.
      3) Coordinate processing for fee for interpreter at no charge to the patient.
      4) Forward invoice to Accounting with check request authorizing payment by Hospital on behalf of the patient.
   e. Utilize friends or relatives of a hearing impaired patient, which have medical terminology experience, when they have been specifically requested by the patient as an interpreter.
   f. Utilize hand written communication or hand signing to communicate with patient, as needed until a qualified interpreter becomes available. (See Appendix A: for hand signing).

4. Communication with persons outside the hospital:
   a. Provide one of the following supplemental hearing devices:
      1) Portable telecommunication device for the deaf (TDD)
         a) TDD equipment is available for use as necessary:
            1. Day time hours: notify the Telephone Operator/Communications Department for assistance.
            2. Nights and weekends: notify Security or House Supervisor for assistance
      2) Sign out TDD phone utilizing “TDD Sign-Out Sheet”.
      2) Telephone headsets with an amplifier and telephones compatible with hearing aids equipped with a telephone coil.

**C. Vision Impaired Patients/Surrogate Communication:**

1. Provide patient guidance and verbal instructions regarding surroundings and where obstacles may occur when a patient/surrogate has vision impairment.
2. Read and explain information that requires patient consent or involves doing a procedure to the patient/surrogate. See additional information regarding admitting forms.
3. Give verbal instructions for all follow-up care in detail to the patient and/or other caregivers.

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D. Patients/Surrogate with a Communication Language Barrier:
   1. Provide one of the following methods of Translation as contracted by the facility:
      a. Interpreters available through telephone services:
         1) Telephone Translator Line for patients/staff use in the translation of foreign languages;
         2) Valley Center of the Deaf.
      b. Review list of available possible hospital personnel who may translate/interpret for the
         patient and call them to assist.
   2. Utilize visual aide for basic care needs and/or alphabet to spell words (i.e., toilet, water, food,
      alphabet letters, etc).

V. Procedural Documentation:
   A. Document:
      1. Translator’s name, date and time used
      2. Type of Interpretation
      3. Translator Telephone Use:
         a. Operator’s name and number
         b. Date, time, and length of the call
      4. Refusal to use an interpreter on waiver form, if applicable.
      5. Account of payment for Translation services (as authorized by the hospital), when applicable.

VI. Additional Information:
   A. Different communication methods for hearing impaired:
      1. Lip reading
      2. Handwritten notes
      3. Assisted listening device
      4. Family or friend to interpret
      5. Sign language interpreter
   B. Translator services:
      1. Provide Translator Service with the following information:
         a. Name of the deaf individual
         b. Location of interpreting assignment (exact address including department)
         c. Name of contact person for the interpreter and an appropriate telephone number and
            extension
         d. Nature of the assignment and anticipated length of assignment
         e. Name of the on-call House Supervisor or Department Director will approve payment for the
            service.
      2. AZ Interpreting Service (480-961-7331)
      3. Freelance Interpreting (480-595-9515)
      4. Statewide Interpreting Service (602-973-8072)
      5. Valley Center for the Deaf (602-267-1921)
         a. In case of emergency, dial 420-303-1305 that is also to be accessed for services after
            5:00 p.m., weekends, or holidays.
   C. Various medical documents and written policies have been translated and are made available to those
      in need. Documents that may be made available to the patient may include consent forms,
      letters/notices that require a response from the beneficiary or client, and documentation that advance of
      free language assistance.

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VII. References:
A.R.S. § 36-1971 – Licensing of Sign Language Interpreters


VIII. Other Related Policy/Procedures:
A. N/A

IX. Cross Index As:
A. Blind
B. Hearing
C. Interpreter
D. Language
E. Handicap
F. Barrier
G. TDD
H. Deaf

X. Attachments:
A. Attachment A: Sign Language Alphabet
Appendix A:

### “SIGN LANGUAGE ALPHABET”

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