



LOMA LINDA  
UNIVERSITY  
MEDICAL CENTER

# LOMA LINDA UNIVERSITY MEDICAL CENTER

## OPERATING POLICY

<b>CATEGORY:</b>	CLINICAL MANAGEMENT	<b>CODE:</b>	M-113
<b>SUBJECT:</b>	COMMUNICATION WITH PATIENTS WHO HAVE LIMITED ENGLISH PROFICIENCY AND/OR ARE HEARING, SPEECH, OR VISION IMPAIRED	<b>EFFECTIVE:</b>	12/2015
		<b>REPLACES:</b>	08/2013
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General Principle: Patients and surrogate decision-makers must be able to understand what they are being asked to authorize, whether it is agreement to the general terms and conditions of the hospitalization, to give and/or receive important medical information, or to give informed consent for a surgical or other procedure. Healthcare information must be communicated plainly in a language or mode that can be understood by the patient or surrogate decision-maker.

### Definition:

Interpretation: For the purpose of this policy, interpretation is the use of a third party to facilitate accurate communication between two or more individuals.

1. Interpreting/communication services shall be made available at no charge to all individuals requiring interpreter services to facilitate communication. Language interpreter services shall be available regardless of area where service is provided. This shall include:
  - 1.1 Limited English Proficiency (LEP)
  - 1.2 Hearing impaired/Deaf
  - 1.3 Speech impaired
  - 1.4 Vision impaired
2. Patients shall not be required to bring their own interpreters. LLUMC staff shall notify LEP, vision impaired, and hearing impaired/deaf patients that services will be provided at no charge.
  - 2.1 Using family members or friends as interpreters is strongly discouraged. However, patients who voluntarily express a preference to provide their own interpreters shall be permitted to do so, as long as it does not compromise the effectiveness of their services or violate patient confidentiality, and only after it has been made clear to the patient that a professional interpreter is available at no cost to them. This offer to the patient and the response shall be documented in the patient's medical record. If a patient chooses to use a family member or friend as an interpreter issues of competency of interpretation,

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confidentiality, privacy and conflict of interest will be considered. If the family member or friend is not competent or appropriate for any of these reasons, competent interpreter services will be provided to the patient. Children and other patients will not be used to interpret in order to ensure confidentiality of information and accurate communication.

2.2 For interpretations of medical information, consent, surgical or other procedure, etc., if the patient's own interpreter is used a qualified interpreter provided by LLUMC shall be present whenever possible to validate such interpretation. If an LLUMC-provided interpreter is not available, the Language Line may be used.

3. LLUMC staff shall be oriented to these requirements, as defined by legislative and regulatory agencies.

4. The Language Services Department shall arrange for translation of written materials. This includes patient education materials, institutional forms, hospital signage, letters to patients, etc.

5. Direct and indirect patient care providers shall be responsible for obtaining interpreter services twenty-four hours a day, seven days a week by one of the following methods:

5.1 Contacting the Spanish/American Sign Language (ASL) in-house professional interpreter

a. Interpretation may be in person or via video conferencing (e.g., Jabber).

5.2 Using the Language Line service in situations when timely service cannot be obtained from the in-house professional interpreters or when another language is needed.

a. Interpretation may be via phone or video conferencing (e.g., Stratus On-Demand Interpreter).

5.3 Using bilingual authorized staff/employees with demonstrated competency in the patient's native language to speak directly with the patient in that language or to provide interpretation (see #6 below).

NOTE: An employee without demonstrated competency shall not be used when the interpretation involves medical condition, medical or other procedural issues, or consent issues.

a. Interpreter services provided to the patient shall be properly documented in the appropriate consent form prior to the performance of the procedure for which the consent was obtained.

5.4 Using their bilingual staff for ordinary conversational interpretations.

5.5 Providing the telephone device for the deaf (TDD) phone.

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6. Authorized staff who provide interpretation services shall be identified for ease of use when needed. A globe symbol is shown on their badges for identification purposes.

NOTE: A staff demonstration of competency is evidenced by the successful completion of a language competency test provided by the Communication Network.

7. In the event of admission of a patient with vision or speech impairments or multiple impairments, the Language Services Department shall be available to collaborate with the patient/family/significant other/referring agency to facilitate communication with the patient.

7.1 For persons who are blind or have low vision, staff shall communicate information contained in written materials concerning treatment, benefits, services, waivers of rights, and consent to treatment forms by reading out loud and explaining these forms. For additional resources, staff should contact the Language Services Department.

7.2 For persons with speech impairments, staff shall contact the Language Services Department which is responsible to provide aids and services in a timely manner, such as: American Sign Language interpreter, video-on-demand, writing materials, TDDs, computers, flashcards, alphabet boards, communication boards, and other communication aids.

8. The provisions of this policy shall be submitted to the California Department of Health Services for review on an annual basis.

APPROVED: Hospital Executive Leadership, LLUMC Chief Executive Officer, LLUMC Medical Staff President, Janet Kroetz



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## MEDICAL CENTER

### ADMINISTRATIVE PROCEDURE

**CATEGORY:** CLINICAL MANAGEMENT **CODE:** M-113.A  
**EFFECTIVE:** 12/2015  
**SUBJECT:** COMMUNICATION WITH PATIENTS WHO **REPLACES:** 08/2013  
HAVE LIMITED ENGLISH PROFICIENCY **PAGE:** 1 of 2  
AND/OR ARE HEARING, SPEECH OR  
VISION IMPAIRED

INITIATOR OF ACTION	ACTION
Patient	1. Indicates need for interpreter (including sign language).
Caregiver	2. Obtains an interpreter by:  a. For in-house Spanish interpreter, contact interpreter between 0800 to 2300 (holidays and weekends included) via page (3715) or designated Ipad/WOW (e.g., Jabber)  b. For after hours and all other languages, use the Language Line 1-800-523-1786 and  1) Indicate language needed 2) Provide LLUMC client ID number 201208 and the cost center of the department using the service.  OR use designated Ipad/WOW functionality (e.g., Stratus On-Demand Interpreter).  c. For hearing impaired:  1) To obtain Sign Language interpreter, call Language Service Department at ext. 42445 or Administrative Supervisor, pager 2005 (after hours and weekends) or use video conferencing.  2) To set up TDD for inpatient, call Communication Network Services (CNS) at ext. 44321 or hospital operator (after hours) to page CNS technician on call.

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<b>INITIATOR OF ACTION</b>	<b>ACTION</b>
Person Requesting Interpreter	3. Provides interpreter with information; and documents in the medical record that an interpreter was used; including interpreter's name, language of patient, and document or issue that was interpreted.
Caregiver/Staff	4. If interpretation of informed consent is involved, ensure that the following are documented:  a. That informed consent was obtained and how  b. The language of the patient, or sign language  c. The interpreter's name (or operator number if Language Line or TDD is used)