	Language Assistance Services (Policy) - PC / RI	PC - Provision of Care, RI - Rights & Responsibilities of the Individual, Treatment & Services
ORIGINATION DATE: 05/09/2016	DATE APPROVED: 06/16/2016	VERSION: 1

I. PURPOSE:

To provide timely language assistance services to patients with language or communication barriers, including “limited English proficiency” (LEP).

II. POLICY:

Mountains Community Hospital (MCH) provides free language assistance services to patients 24 hours a day in a manner consistent with Title VI of the Civil Rights Act of 1964, which says “no person in the United States shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.”


A patient and/or patient’s companion who does not speak English as their primary language, and who has limited ability to read, write, speak or understand English is entitled to language assistance services. All Hospital employees, providers and contracted staff are responsible for recognizing and addressing the language assistance needs of patients with language or communication barriers.

III. DEFINITIONS

A. **Language or communication barriers** mean:

1. With respect to spoken language, barriers that are experienced by individuals who are limited English speaking or non-English speaking individuals who speak the same primary language and who comprise at least 5% of the population of the geographical area served by the Hospital or of the actual patient population of the hospital.
2. With respect to sign language, barriers that are experienced by individuals who are deaf and whose primary language is sign language.

B. **Language assistance** includes interpretation, which means oral or spoken transfer of a message from one language into another language (including sign language); and/or translation, which means the written transfer of a message from one language into another language.

	Language Assistance Services (Policy) - PC / RI	PC - Provision of Care, RI - Rights & Responsibilities of the Individual, Treatment & Services
ORIGINATION DATE: 05/09/2016	DATE APPROVED: 06/16/2016	VERSION: 1

- C. **Interpreter** means someone fluent in English and in the necessary second language, who can accurately speak, read and readily interpret the necessary second language, or a person who can accurately sign and read sign language. Interpreters must have the ability to translate the names of body parts and to competently describe symptoms and injuries in both languages.

IV. PROCEDURE:

A. Language Assistance:


1. At all initial points of contact (e.g. admission/ registration desks) written notices are posted indicating the right to and availability of free language assistance services. The notices include the specific languages for which interpretation is available (including sign language). If the specific language needed is not listed on the notices, the Hospital's contracted interpreter service, "Cyracom," is to be contacted for assistance.
2. The patient's primary language and/or dialect is identified at registration and documented in the patient medical record. If desired, it may also be documented on a hospital identification band, bedside notice, or nursing shift report form.
3. MCH employees, providers and contracted staff shall recognize the language assistance needs of patients and take reasonable steps to offer meaningful access to language assistance when needed.

B. Translation of Documents:


Vital documents that are routinely provided to patients in the English language are also made available in other regularly encountered languages as required by Title VI of the Civil Rights Act of 1964. Administrators and department managers are responsible to identify the need for translation of documents. Currently, MCH provides vital documents in Spanish. Educational materials may be translated as resources allow.

C. Interpreters:

1. Hospital personnel, family members, and other individuals are not to be used as interpreters unless the patient chooses a family member or friend to interpret AFTER being informed of the availability of a professional interpreter.

	Language Assistance Services (Policy) - PC / RI	PC - Provision of Care, RI - Rights & Responsibilities of the Individual, Treatment & Services
ORIGINATION DATE: 05/09/2016	DATE APPROVED: 06/16/2016	VERSION: 1

2. MCH utilizes Cyracom interpreter services for patients and/or their designated companion. Cyracom telephone or online interpreters must be used when discussing a patient's symptoms, medical condition, medications, medical history or plan of care unless the patient specifically chooses to use a family member or friend AFTER being informed of the availability of the interpreter service (see item "d" below).
 - a. Telephone Services – Telephone interpreters are accessible as described below. More specific instructions are provided in the attachment, ([Accessing a Cyracom Interpreter by Telephone](#)).
 - i. Dial extension 8018 from a Hospital phone, or
 - ii. Dial (800) 481-3293 from any phone and enter the Hospital's access code and PIN, or
 - iii. Use the "blue phones" that are located throughout MCH.
 - iv. The caller will be prompted to:
 - Enter the desired language
 - Add a 3rd party caller if necessary
 - Enter the patient's medical record number
 - Enter the PIN number if accessing through (800) 481-3293.
 - b. Online Services – Video interpreters are available for American Sign Language (ASL). Instructions for access are described in the attachment, ([Accessing a Cyracom Interpreter for American Sign Language](#)).
 - c. If the language need of the patient is not listed on the Cyracom menu, the Cyracom interpreter service must be contacted as follows:
 - i. Press the red button from any "blue phone" or
 - ii. Call (800) 481-3289, then enter the Hospital's access code and PIN.
 - d. Informal Interpreters – Informal interpreters may include family, friends, employees and other representatives.
 - i. MCH does not require, suggest or encourage the use of informal interpreters.
 - ii. MCH does not rely on informal interpreters to translate for a patient except in the following circumstances:
 - In an emergency involving an imminent threat to the safety or welfare of an individual or the public where there is no interpreter available, or


	Language Assistance Services (Policy) - PC / RI	PC - Provision of Care, RI - Rights & Responsibilities of the Individual, Treatment & Services
ORIGINATION DATE: 05/09/2016	DATE APPROVED: 06/16/2016	VERSION: 1

- When the individual with a disability specifically requests that an accompanying adult interpret or facilitate communication, AND the accompanying adult agrees to provide such assistance, AND reliance on the adult for such assistance is appropriate under the circumstances.
 - iii. The use of minor children for interpretation is prohibited except in emergencies involving an imminent threat to the safety or welfare of an individual or the public where there is no interpreter available.
 - iv. MCH does not conduct formal testing for language competence among its staff or providers; therefore all bilingual staff is considered informal interpreters for the purposes of this policy.
3. The use of an interpreter(s) should be documented in the patient's medical record. Documentation will include the interpreter's "Interpreter Identification Number" (IIN).
 4. For 24-hour assistance from the interpreter service, call Cyacom Client Services at (800) 481-3289.

D. Auxiliary Aids and Services:

Title III of the Americans with Disabilities Act (ADA) prevents discrimination on the basis of disability by places of public accommodation, including hospitals. MCH complies with the associated regulations regarding "auxiliary aids and services" (such as closed captioning on televisions) for the disabled including, but not limited to persons with vision, hearing or speech impairments.

As resources allow, the Hospital takes steps to ensure that no individual with a disability is excluded, denied services, segregated or otherwise treated differently from other people because of the absence of auxiliary aids and services. It is noted that the Hospital does not, during its normal course of operation, alter its inventory to make special orders for unstocked goods upon request by patients.

	Language Assistance Services (Policy) - PC / RI	PC - Provision of Care, RI - Rights & Responsibilities of the Individual, Treatment & Services
ORIGINATION DATE: 05/09/2016	DATE APPROVED: 06/16/2016	VERSION: 1

E. Monitoring and Required Reporting:

1. This policy will be reviewed annually through the established policy review channels. The review will include an evaluation of “meaningful access” to services by LEP individuals through analysis of:
 - a. Reports from the Health Information System on the primary languages of MCH patients.
 - b. Reports from the CyraCom interpretation service on the languages accessed by MCH patients and frequency of access.
 - c. The nature and importance of the programs or services utilized by LEP patients.
 - d. A determination of whether 5 percent or 1000 patients speak a specific language, which would trigger consideration of the need for translation of patient documents.
 - e. A cost analysis of the interpretation service.
2. Effective July 1, 2016 and every January 1 thereafter, the Hospital will distribute its policy on language assistance services as follows:
 - a. Send a copy to the California Department of Public Health.
 - b. Post the policy and a notice about the availability of language assistance services on the Hospital website. The notice will be posted in English and any other languages most commonly spoken in the Hospital’s service area (currently, Spanish).

REFERENCES

U.S. Department of Justice (2016). Title VI of the 1964 Civil Rights Act. Retrieved from <https://www.justice.gov/crt/title-vi-1964-civil-rights-act>

California Hospital Association (2018). Consent manual (45th ed.).