

**UPMC PINNACLE
POLICY AND PROCEDURE MANUAL**

INDEX: Administrative

SUBJECT: Foreign Language Services for Non-English Speaking and Limited English Proficiency (LEP)

DATE: May 1, 2020

I. POLICY

UPMC Pinnacle is committed to treating all people with dignity and respect and to providing patient-centered care and a therapeutic environment. This includes taking appropriate steps to ensure that we communicate effectively with all patients, visitors and guests, including those with Limited English Proficiency (LEP), such that all have an equal opportunity to participate and have meaningful access to our services, activities, programs or other benefits.

The goal is to reduce linguistic barriers for Limited English Proficiency (LEP) patients seeking care at UPMC Pinnacle. In addition, it is UPMC Pinnacle's policy to provide communication assistance and translated print materials, where necessary for effective communication with patients and visitors.

UPMC Pinnacle physicians and staff are required to provide interpreter and translation services during critical aspects of care, which include but are not limited to health care decision-making (living wills or powers of attorney), obtaining a history and physical, informed consent (for surgery, blood, etc.), discussing symptoms, diagnoses, surgical options or treatments, or organ donations.

The Joint Commission requires healthcare facilities to use "qualified" medical interpreters. There is no cost to patients, visitors and guests who require interpreter and/or translation services. The specific services provided will be determined on a case-by-case basis.

II. PURPOSE

The purpose of this policy is to promote patient safety by accomplishing these objectives: 1) to ensure effective, accurate and comprehensible communication between patients, their families, members involved in their care, healthcare providers, and staff consistent with Title VI of the Civil Rights Act of 1964, the Americans with Disabilities Act, and other applicable federal, state, and local laws. The implementation of these guidelines is essential to UPMC Pinnacle's mission of providing all persons meaningful access to our services, activities, programs and benefits; 2) to educate UPMC Pinnacle physicians and staff about the system's commitment to effectively communicate with patients, visitors and guests; 3) to inform UPMC Pinnacle physicians and staff about the process for providing the appropriate use of the video-remote and over-the-phone interpreting as well as qualified medical interpreters; and 4) to notify UPMC Pinnacle physicians and staff about translation services for printed information available to all patients and family members who have Limited English Proficiency (LEP).

III. SCOPE

This policy applies to the following UPMC Pinnacle hospital facilities:

[Check all that apply]

- UPMC Pinnacle Hospitals (UPMC Pinnacle Harrisburg, UPMC Pinnacle Community Osteopathic, and UPMC Pinnacle West Shore)
- UPMC Carlisle
- UPMC Memorial
- UPMC Lititz
- UPMC Hanover
- UPMC Pinnacle owned or controlled entities

IV. **DEFINITIONS**

Cognitive/Intellectual Disability	Disturbances in brain functions, such as memory loss, problems with orientation, distractibility, perception problems, and difficulty thinking logically.
Foreign Language	Any spoken or manual language other than English including American Sign Language
Illiteracy	Inability to comprehend and/or communicate in written language.
Informed Consent	Refer to system-wide policy ECR3 Informed Consent.
Interpreter	An individual that takes communication spoken in one language and converts it into another language either in-person, via telephone, Internet or video.
Interpreter and Translation Services	Services offered by UPMC PINNACLE that provide free access to language interpretation to all individuals that are patients, family members or visitor and have limited English proficiency.
Language Barriers	Limited ability or inability to speak or understand the English language.
LEP	Individuals with limited English proficiency, including low literacy, English-as-a-second-language speakers, and/or those with little to no understanding of the English language (commonly individuals from outside English-speaking countries and communities).
Living Will	Also known as advance directives, a document that outlines a patient's preferences regarding treatment if faced with a serious accident or illness, and cannot speak for themselves.
Low Literacy	Noticeable or express difficulty with comprehension and/or communication in written language.
Power of Attorney	A document, signed by a competent adult, i.e., "principal," designating a person that the principal trusts to make health care decisions on the principal's behalf should the principal be unable to make such decisions. The individual chosen to act on the principal's behalf is referred to as an "agent."
Translator	An individual who transfers written text from one language to another.

V. **PROCEDURE:**

UPMC Pinnacle provides language assistance and communication support at no cost, including interpreter and translation services, to **any** patient, family member, visitor or guest who requires assistance in order to effectively communicate with care providers and/or obtain services or benefits.

VI. **EXCEPTIONS:**

Unless authorized by Legal Services, UPMC Pinnacle does not provide interpreting services to any external agencies, such as Children and Youth (C&Y), Department of Mental Health (DMH), or any law enforcement agency seeking information from LEP patients.

Professional medical interpreting services are available to effectively communicate removing any language barrier and ensuring equal access to quality care. Interpreters are available 24 hours per day and 7 days per week including holidays via phone or video remote interpreting (VRI). Hospital certificate and certified medical interpreters, or face-to-face contracted interpreters are available on an as needed and emergency basis.

During all points of registration, if it has not been identified, the patient will be asked what his/her preferred language is. This information will be entered into the electronic medical record. If the patient identifies language needs as being anything other than English, the registrar then asks the patient if an interpreter is needed. The response of yes or no will be entered in the electronic medical record.

A. IDENTIFYING THE NEED FOR COMMUNICATION ASSISTANCE

1. **Assessment:**

- a. Initial Assessment (Oral): Every patient's ability to communicate effectively should be assessed during the initial assessment or visit. If a provider / staff determine that, the patient needs assistance and/or if the patient requests such assistance, the provider / staff should document that need in the patient's medical record. The provider / staff should also document the type of required assistance in patient's medical record and/or the patients preferred language. With input from the patient, the provider / staff should also select the most appropriate language assistance type.
- b. Initial Assessment (Written): Every patient's ability to understand written documents should be assessed and documented in the patient's medical record. In addition to being a Limited English Proficiency (LEP) individual, some patients also have literacy challenges. Providers / staff should be sensitive to indicators that a patient cannot read and/or understand written documents. If a provider / staff determine that, the patient needs assistance and/or if the patient requests such assistance, the provider / staff should document that need in the patient's medical record. For patients who speak limited English, they should be provided with translated documents that are vital to their healthcare experience or such documents shall be read to them in their preferred language (e.g., informed consent forms, advance directives, discharge instructions, etc.)
- c. Identifying the Type of Assistance Provided: Understanding that effective communication is a key component of patient safety. To that end, we are committed working with the patient to identify an effective language assistance option from our available "communication resources". We are also committed to ensuring that its visitors and guests are able to fully enjoy the products and services that it provides.

- d. Identifying appropriate language: If language has not been identified, Interpreter Service language identification posters are available. The poster lists languages commonly encountered. The Hospital staff member should make an attempt to decide what language the person speaks, by showing the poster to the non-English speaking person. The non-English speaking person should recognize their appropriate language on the poster.

CyraCom Language Interpretation Phone Services may also be used if you are unable to determine what language the patient speaks, please call CyraCom Client Services at 1-800-481-3289.

2. Medical Record Documentation:

- a. Interventions for foreign language needs should be documented.
- i. Inpatient Services, document in the “Daily Cares and Safety Flow Sheet” under Interpreter Services and for Emergency Services document under “Language – Language Assistant. Include information about:
 - Preferred language (spoken and/or written)
 - Assistive services used by patient (i.e. phone, VRI, face-to-face interpretation services, or patient’s preferred communication assistive services),
 - Interpreter ID, and/or name, first and last
 - ii. Provider Documentation: In the “Note” section a “SmartPhrase” was embedded labeled “LEPServices.” Document the following information:
 - Interpreted service: (i.e.: live interpreter, CyraCom, etc.)
 - Interpreter ID: (number provided or name, first and last)
 - Language: (i.e.: Spanish, Chinese, Nepalese, etc.)
 - iii. For Outpatient Services: If your charting application does not have Interpreter Services template the following information should be documented in your Notes section:
 - Interpreter used for: (i.e.: consent, education, etc.)
 - Interpreted by: (i.e.: live interpreter, CyraCom, etc.)
 - Interpreter ID: (number provided or name, first and last)
 - Language: (i.e.: Spanish, Chinese, Nepalese, etc.)

3. Refusal or Waiver of Services:

If an LEP patient wishes to refuse our interpreter services, the provider / staff will review with the patient, using an approved assisted device or a Bridging the Gap certificate interpreter or a Nationally Certified interpreter, the risks and benefits of waiving their rights to a professional medical interpreter. If the patient still exerts his or her right to refuse the services then the patient must sign an “Interpreter Services Waiver Form,” which the provider / staff will also sign. The provider / staff will include the signed waiver form with the patient’s medical record. Providers / staff retain the right, and are encouraged, to keep the medical interpreter via phone, VRI, or face-to-face involved during an encounter with a patient and may do so at their discretion.

Physicians / staff should document any refusal of communication assistance services in the patient's medical record.

Patient/client refusing the use of the approved assisted devices or face-to-face interpreting services and indicates the desire for a family member or friend to act as interpreter, this needs to be documented in the patient's medical record and the Foreign Language Interpreter Waiver needs to be completed. Providers / staff retain the right, and are encouraged, to keep the medical interpreter via phone, VRI, or face-to-face involved during an encounter with a patient and may do so at their discretion. (See Attachment A)

B. ACCESS

1. On initial assessment staff will identify the patients preferred language for spoken information when discussing healthcare issues, and preferred language when reading health care related materials and documents. Staff will also review the preferred spoken and written language during admission assessment process.

Staff will offer to all LEP patients and families and inform them that services are free of charge.

The use of an over the phone interpreter service is available through CyraCom 24 hours a day, 7 days a week. The phone system provides access for over 150 languages.

If telephonic or Video Remote interpreting (VRI) services are accepted via CyraCom, follow the directions below:

- a. **CyraCom (blue) phones** must be plugged into analog (single line) ports only. These ports are located in all patient rooms, or where modem or fax lines are installed.
- b. To access the interpreter, refer to the CyraCom phone operating guide attached to the phone or utilize the CyraCom telephone prompt directory. Press the button labeled "ACCESS," and when directed to enter "account number," press the white button on the phone labeled "Account/Pin."
- c. See Attachment B for detailed instructions on use.

2. Accessing a Medical Interpreter using an alternative phone line:

- a. If it is not possible to locate a CyraCom phone, utilize a speaker phone in a private location and dial **1-800-481-3293**, when prompted, enter account and PIN for your site below:

Facility Name	Account Number	PIN
UPMC Memorial	501020532	2268
UPMC Carlisle	501019817	2373
UPMC Hanover	501026357	5335
UPMC Lititz	501012876	9144
UPMC Pinnacle Harrisburg	501012876	9144
UPMC Pinnacle Polyclinic	501012876	9144

UPMC Pinnacle Community Osteopathic	501012876	9144
UPMC Pinnacle West Shore	501012876	9144

- (i) State the language you need.
 - (ii) Listen to prompts if you would like to add an additional person to the call or select operator assistance.
 - (iii) When the interpreter comes on the line give the interpreter a brief explanation of the call.
 - (iv) You may use the hands free (speaker) option on your phone in a private area.
3. **CyraCom VRI** (Video Remote Interpreting) provides immediate video access to certified medical interpreters, 7 days a week, 24 hours a day on demand.

CyraCom VRI devices are placed in the following locations.

- a. Emergency Departments—All campuses.
 - (i) Available to Emergency Department personnel for emergent communication needs.
- b. Nursing Administration Offices
 - (i) Available to the entire healthcare team for needs unable to be met by the CyraCom phone.
 - (ii) Contact the Nursing Supervisor to coordinate access to the CyraCom VRI
 - (iii) See Attachment B for detailed instructions on use.

4. Working with Interpreter

- a. Brief the interpreter about the type of encounter or if there are any factors that could affect communication with the patient.
- b. Allow time for Interpreter introduction.
- c. “Hello my name is... I will be your *Language* interpreter. Please look and speak directly to the patient. Pause often so that I may be able to interpret accurately” Then Interpreter will introduce themselves to the Patient.
- d. Focus Camera on Patient and Provider. If space does not allow, focus on Patient.
- e. Inform the interpreter of other providers or family members not in front of camera.
- f. Please lower or turn off TV as it may distract the interpreter.
- g. Look and speak directly to patient. Don’t say: “Ask her if she has pain” instead say “Are you having pain?”
- h. Pause Often: Speak in complete sentences or phrases. Pause so interpreter may interpret accurately. When giving instructions, pause after every sentence or bullet point.

5. Disconnecting

- a. To end call, press red phone icon.
- b. Disconnect when done with session or if stepping away for a few moments. This is done to:
 - (i) Respect patient’s privacy. Interpreter cannot walk away if provider leaves room and patient wants privacy.
 - (ii) In order to utilize resources appropriately, we want to make sure to only be connected while we need to interpret.

6. Troubleshooting:

If there are any error messages or connectivity issues, please contact Hospital Help Desk or see attachment C.

C. ORDERING CYRACOM VIDEO INTERPRETATION CART OR INSTALLING CYRACOM SOFTWARE ON AN IPAD

1. To order a CyraCom Video Interpretation Cart:

- a. Open an IT Service Request for "New Hardware"
- b. Under Description of Hardware Requesting," type: CyraCom Video Cart Setup
- c. The cost of the CyraCom Video Cart is approximately \$2,000 and will be charged to your Cost Center

2. To request CyraCom Software be Installed on an iPad:

- a. Open an IT Service Request for "New Software"
- b. Under "Other," type: CyraCom Interpreter App
- c. There is no charge for the software

D. GUIDELINES AND REQUIREMENTS FOR LIVE FACE TO FACE INTERPRETATION SERVICES

1. Patient's requesting a live interpreter during non-business hours, the telephonic or VRI will need be used in the interim until arrangements can be made. Please call the Department of Mission Effectiveness at 717-576-8532 or 717-782-5522 to arrange.
2. To pre-schedule a live interpreter for an LEP for a specific date and time, please call the Department of Mission Effectiveness at 717-576-8532 or 717-782-5522.

E. GUIDELINES AND REQUIREMENTS FOR WRITTEN TRANSLATION SERVICES

1. For Translation needs, please contact the Department of Mission Effectiveness at 717-782-5522 or 717-576-8532.

F. USE OF TECHNOLOGY TO INTERPRET OR TRANSLATE WRITTEN MATERIALS

1. UPMC Pinnacle prohibits the use of interpreting and translating websites and/or apps to provide interpretation and/or translation to UPMC Pinnacle patients as an alternative to using UPMC Pinnacle Interpreter Services.

VII. RESOURCES

This policy incorporates state and federal mandates, regulations and national standards for medical interpreting from:

- Americans with Disabilities Act, 1990
- Department of Public Health, Division of Health Care Quality
- Department of Public Health, Office of Minority Health
- Emergency Medical Treatment and Labor Act (EMTALA), 1986
- Federal Law, Section 504 of the Rehabilitation Act of 1973
- Hill-Burton Act, 1946
- National CLAS Standards, 2001
- Office of Civil Rights Policy Guidance on the Prohibition Against National Origin Discrimination As It Affects Persons With Limited English Proficiency. Federal Register / Vol. 65, No 169 / August 30, 2000.
- The Joint Commission, Standards HR.01.02.01, PC.05.05.21, RI.01.01.03, 2011
- The White House, Executive Order, August, 2000
- Title VI of the Civil Rights Act, 1964

VIII. REFERENCES

Patient’s Rights, Responsibilities, and Grievance Procedure
Visually and Hearing Impaired Communication Services
Section 504 Grievance Policy/Procedure

IX. REPLACES / PRECEDES THE FOLLOWING POLICIES

- UPMC Pinnacle Hospitals – Administrative Policy ECR-53
- UPMC Carlisle – Policy# RI8-14
- UPMC Lititz – Administrative Policy - Use of Translation Services Policy and A134
- UPMC Memorial – A134
- UPMC Hanover - Administrative Section 01

SIGNED: Phil Guarneschelli, President and CEO

ORIGINAL: December 1, 2018

APPROVALS: Corporate Policy and Procedure Committee of UPMC Pinnacle; May 2020

REVIEWED BY:

PRECEDE:

SPONSOR: VP Mission Effectiveness

REVIEW DATE(S):

RECENT REVISION DATE(S):

January 23, 2020

April 23, 2020

FOREIGN LANGUAGE INTERPRETER WAIVER

<p><input type="checkbox"/> WAIVER OF FREE SERVICE</p> <p>I was notified that UPMC Pinnacle has Language Services available for the Hearing Impaired and Non-English and/ or Limited English Proficiency Speaking patients/customers. The Language Services of Telephonic, Video Remote Interpreting or a qualified interpreter are available to me and my family at no cost.</p> <p>By signing my name below, it certifies my understanding of these free services but choose to decline to participate.</p>
<p><input type="checkbox"/> USE OF OWN INTERPRETER</p> <p>I also acknowledge that I have refused these free interpreter services and have chosen to use my own interpreter, at my own expense, for personal reasons. (name of person using as an Interpreter) _____ will act as my interpreter for this hospitalization/office visit. To my knowledge, my interpreter is over the age of eighteen (18) and understands medical information.</p> <p>Even though I am providing my own interpreter, UPMC Pinnacle may choose to use an interpreter via Telephonic, Video Remote Interpreting or a UPMC Pinnacle qualified interpreter, to assist the physicians and staff in communicating with me during this hospitalization/office visit to assure accuracy of the interpretation being provide.</p> <p>By signing my name below, it certifies my understanding and request to use the person listed above.</p>
<p><input type="checkbox"/> ACKNOWLEDGEMENT</p> <p>I understand that any interpreter used, whether family, friend, Telephonic, Video Remote Interpreting or a UPMC Pinnacle qualified interpreter, will have access to my medical information. However, no one interpreter will have access to my written medical records unless the provider or staff are accessing those records to help facilitate oral communication. Telephonic, Video Remote Interpreting and all UPMC Pinnacle qualified interpreters are obligated to maintain all information shared confidential as required by HIPPA.</p> <p>By signing my name below, it certifies my understanding.</p>

I also understand I can withdraw this waiver at any time and ask UPMC Pinnacle to provide me with an interpreter at their expense.

I have read the form in my target language and/or translated to me orally by the interpreter indicated below:

Patient _____	Signature _____	Printed Name _____	Date _____	Time _____
Interpreter _____	Signature or ID# _____	Printed Name _____	Date _____	Time _____
Staff (Witness) _____	Signature _____	Printed Name _____	Date _____	Time _____

<p>UPMC Pinnacle</p> <p>NOTICE OF AVAILABLE INTERPRETER SERVICES FOR THE HEARING IMPAIRED AND NON OR LIMITED ENGLISH PROFICIENCY PATIENTS / CUSTOMERS</p> <div style="text-align: center;">  </div> <p style="font-size: small;">Form 100-100 (02/17) MR (v4) Acton, Benade 2020</p>	<p style="text-align: center;">PATIENT IDENTIFICATION</p>
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