

Medical Interpreting Services

UC Davis Medical Center

Hospital Policies and Procedures

Policy ID: 2881

Revised 06/08/2016

I. PURPOSE

This section outlines the policy and procedures for providing interpreting services at the University of California, Davis, Medical Center (UCDMC).

II. SETTING

Medical Center

III. POLICY

- A. Trained medical interpreters are available in person, and/or via video and telephone to all Limited English Proficient (LEP) and hearing impaired/deaf patients to facilitate care between patient and provider, including following up with patients at home after procedures.
- B. In accordance with current legislative and regulatory requirements, UCDMC patients seeking and receiving care will have access to qualified medical interpreters and are not required to bring or provide an interpreter.
- C. Signs in multiple languages alerting LEP patients and all hearing impaired/deaf patients that interpreter services are provided at "no cost to them" are posted throughout the hospital and ambulatory clinics.
- D. Medical interpreters are trained in medical vocabulary, comprehension, retention, and note taking. They are trained to respect patient confidentiality, pursuant to the Health Insurance Portability and Accountability Act (HIPAA), to honor their own neutral role and work to maintain the integrity of the patient/provider relationship. Therefore, the use of family members as medical interpreters is strongly discouraged.
- E. Some patients may prefer to bring or provide an interpreter. In such cases, UCDMC will permit patients to do so as long as it does not compromise the quality of patient care services. UCDMC does not reimburse for interpreting services provided by non UCDMC interpreters at the patient's request.
- F. Minors should not serve as interpreters.
- G. When scheduling patient appointments, language information shall be captured.

IV. PROCEDURE/RESPONSIBILITY

- A. Medical Interpreting Services (MIS)
 1. Staff may arrange for an interpreter by accessing the Medical Interpreting System via Citrix or calling MIS. Routine office hours are: Monday through Friday from 8 a.m. to 5 p.m.
 2. During routine office hours, staff medical interpreters are on campus for commonly requested languages (American Sign Language, Cambodian, Cantonese, Hindi, Hmong, Korean, Lao, Mandarin, Mien, Punjabi, Russian, Spanish, Thai, Ukrainian, Urdu, and Vietnamese).
 3. Spanish interpreters available on Vocera as follows: Monday – Sunday (including Holidays) from 8 a.m. to 7 p.m.
 4. Other languages can be arranged during off hours by contacting MIS dispatch lines. The Hospital Operator will contact the on-call staff interpreter.
- B. Physicians, Nurses, and Other Hospital Staff
 1. Identify the need for an interpreter and enter request through MIS system or call MIS dispatch lines.
 2. For hearing impaired/deaf patients and other languages not listed in the MIS system, call MIS on the 24-hour dispatch line.
 3. Document the use of a UCDMC medical interpreter, including the interpreter's first and last name in the electronic medical record (EMR) or patient's progress notes.
 4. Document the use of a UCDMC medical interpreter when obtaining consent on the Consent to Operation, Procedures, Blood Transfusion and Administration of Anesthetics form.

5. Document when the patient refuses to utilize a UCDMC medical interpreter, state the reason, and who interpreted.
- C. Written Translations
1. Translation services are available to support and facilitate translation of vital and non-vital documents related to patient care.
 2. Translation services works closely with departments to support and assist with:
 - a. Reviewing translation needs
 - b. Reviewing existing documents for translatability, literacy considerations, and cultural appropriateness
 - c. Budgeting and planning for cost effective translation
 - d. Adapting existing documents for translation
 - e. Creating documents appropriate for target audience
 3. For written translation services call MIS dispatch lines.
- D. Human Resources
- Policies on the provision and utilization of interpreter services for communication with LEP and hearing impaired/deaf patients is included as part of UCDMC "New Employee Orientation."
- E. In keeping with Health & Safety Code Section 1259 (c)(2), this policy outlines delivery of language services to patients with language or communication barriers. Interpreting Services shall submit to California Department of Public Health (CDPH) on an annual basis, a copy of this policy and a summary of Interpreting Services efforts to ensure adequate and speedy communication between patients with language or communication barriers and staff. The timeline for this submission is November.