

HACKETTSTOWN REGIONAL MEDICAL CENTER
Administrative Policy & Procedure
Communication: Foreign Language, Hearing Impairment & Speech Disorder

Effective Date:	January 1995	Policy No:	AD30
Cross Referenced:		Origin:	Pastoral Care
Reviewed Date:	1/99, 2/00, 1/03, 8/03, 6/05, 1/08 4/08, 4/09, 1/11, 9/12	Authority:	Chief Operating Officer
Revised Date:	1/08n 9/12	Page:	1 of 7

PURPOSE

To develop a process which recognizes the importance of ensuring that all individuals are given an opportunity to exchange information with service providers; and attempts to lessen barriers of communication related to foreign language, hearing impairment/deafness or any other communication disorder affecting comprehension or expression.

POLICY

- A. It is the duty and obligation of every employee to identify patients with special communication needs and make the proper referral.
1. Registration will notify the Administrative Coordinator when a patient presents with special communication needs.
 2. The Admitting Nurse (ED, Floor RN) will screen of needs and facilitation of services will begin or continue.
 3. The Primary Nurse will monitor the patient on a daily basis during the hospital stay to ensure communication needs are being met.
- B. The following services will be provided, at no cost, to facilitate communication between patients/families and caregivers:
1. Employee Interpreters: Employees should only interpret basic conversation and not clinical information. Employees may be used for patient/visitor reassurance.
 2. Cyracom Telephone Interpreters: A telephone service accessed through an operator who provides immediate translation for patients/families.
 3. Speech Therapy consultation for individuals with communication disorders secondary to pre-existing conditions that impede exchange of information between the patient and service providers.
 4. Equipment: The following assistive communication devices are available:
 - a. Telephone signaling devices, (phone flasher) are used in the patient's room on existing phones for communication.
 - b. Telephone amplifiers for persons with hearing impairment.
 - c. Picture/word communication board for people who have limited speech.
- C. HRMC is committed to providing written information to patients in a language they can understand. HRMC contracts with a company to provide document translation (taking written words in one language and rewriting the content into another language.)
- We use: UNO Translations and Communications, LLC
Telephone: 571-333-5515
Website: www.unotranslations.com

Translation of marketing publications is addressed and handled through the Marketing Department.

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PROCEDURES

- A. To access a staff interpreter: for non-clinical communication
Notify the Nurse Manager or Administrative Coordinator and request an interpreter.
- B. To Use Cyacom Telephone Interpreters (>300 languages, 24 hrs/day).
Any phone is suitable but dual handset phones and portable phones are located throughout the institution.
1. List questions or necessary information required before calling.
 - a. Pick up the left handset to get a dial tone. Follow instructions as stated on the phone.
 - b. Once connected to the operator, state:
 - 1) Language needed;
 - 2) Your location: Organization name: Hackettstown Regional Medical Center.
 2. The operator will return with an interpreter, confirm that all parties are present and then exit the call.
 3. Brief your interpreter on the nature of the call. Then give interpreter specific questions to relay.
 4. Use a dual handset telephone system.
 5. The interpreter will relay information to you and await further requests.
 6. When you have concluded your use of the service, thank the interpreter for their assistance, secure the confirmation number for the call and end the call.
 7. **Document use of Cyacom Telephone Interpreters in patient's medical record.**

NOTE: Utilization of services is monitored by the Patient Relations Department.

- C. For Communication Barriers secondary to pre-existing conditions:

Speech Therapy (ext. 6835) will be notified per protocol when individuals with pre-existing communication disorders (aphasia, receptive/expressive language disorder, unintelligible speech) who are exhibiting difficulty expressing their needs or understanding information given.

Speech-Language Pathologist will provide assistance deemed appropriate and effective to ensure maximum communicative effectiveness. Such assistance may be in the form of:

1. Using a picture communication board
2. Employing specific clarification strategies
3. Providing cueing techniques
4. Giving written guidelines for staff
5. Any other means of enhancing communication exchange between the patient and hospital staff.

Speech-Language Pathologist will provide follow-up as needed.

Note: Any patient who is in need of a speech/language or swallowing evaluation related to admitting diagnoses should be referred to Speech Therapy through request for screening based on initial nursing assessment or physician orders.

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D. Deaf and Hard of Hearing:

1. a. Notify the Nurse Manager or Administrative Coordinator that a patient needs a sign language interpreter; or a telephone amplifier.
 - b. Post signage in patient's room (above bed, on white board) to signify hearing impairment
2. a. If a patient is deaf:
 - 1) Utilize the "phone flasher" on the existing phone in the patient's room unless declined by patient.
 - 2) Inquire if a sign language interpreter is desired.
- b. If patient is hearing impaired but not deaf, utilize the Telephone Amplifier on the existing phone in the patient's room.
3. Call Speech Therapy at extension 6835 and leave a message regarding the patient and what has been provided.
4. Notify Patient Relations (x7766) when a deaf patient is admitted.
5. There is a list of interpreter services for the deaf and hard of hearing:
 - a. **Sign Language Interpreters (See attachment)**
 - b. **General Resource:**
Division of Deaf and Hard of Hearing, Interpreter Referral Service
(609)984-7283 (V/TTY) or 800-792-8339
 - c. **Hearing impaired, but not deaf**
Self-Help for Hard of Hearing People (SHHH)
Local Coordinator - (**See attachment**)

E. To translate a document:

1. Determine language(s) needed based on population served.
2. Department Directors/Managers will work with their department to identify which documents need to be translated. Clinical information, patient education material, consent forms, instructions are all good examples of documents that should be considered.
3. Forward them to Patient Relations Department with a completed "Document Translation Request" form (**see attachment**).
4. Patient Relations will coordinate the translation of the documents and maintain a list of documents that have been translated and in which language(s).
5. The translated document will be presented to Forms Committee for forms control (i.e., bar coding, numbering, document maintenance) by the Patient Relations Department.
6. The Patient Relations Department will notify the requesting department that the documents have returned and have been forwarded to Materials Management.
7. The requesting department may then order copies of the documents for their patients.

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Document received by Patient Relations: _____ (date/initial)
 Document sent to UNO by Patient Relations: _____ (date/initial)
 Translated document received back from UNO: _____ (date/initial)
 Translated document presented to Forms Committee: _____ (date/initial)
 Translated document approved by Forms Committee: _____ (date/initial)
 Comments: _____

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ATTACHMENT I

List of Employees Who Speak a Foreign Language:

LANGUAGE	EMPLOYEE	LOCATION	EXTENTION	SHIFT
BURMESE	Grace Thant	Patient Business	7905	
DUTCH	Aukje Kuntz, RN		6860	Nights
FRENCH	David Scolnick, MD	Emergency Dept	6800	
	Natalie Frapreau	Nursing	6860	Days
	Yve Lauter-Jerome	OB	6858	Days
	Jean Duclair	PCU	7740	Nights
HAITIAN-CREOIE	Yve Lauter-Jerome,	OB	6858	Days
HINDI	Sam Dindayal	Diagnostic Imaging	6842	Days
HUNGARIAN	Irene Kroeper	ICCU/PCU	6838	
	Anita Ancsin	OR	7777	
ITALIAN	Stella Visaggio	COO	6928	Days
LITHUANIAN	Cassimiera Liobe	Nurse Education	8877	Days
POLISH	Dorota Ners	ICCU/PCU	6838	Nights
	Liz Nielwodzki	SDS	6858	Days
	Ella Bielecka	Lab	6849	Days
	Aneta Rzeszutko	PCU	7740	Nights
	MaciejNers	PT	69214	Days
PORTUGESE	Deb Occhipinti	Lab	6849	Nights
ROMANIAN	David Scolnick, MD	Emergency Dept	6800	Days
RUSSIAN	Yelena Bentsman	Lab	6849	Evenings
Spanish	Astrid Cardenas	Registration	6903	Days
	Dara Derrick	Reg. Coordinator	6870	Days
	Maria Hernandez	Housekeeping	6945	Days
	John Oster	Environmental	6945	Nights
	Karen Carrigan	OB	8888	Nights
	Deb Occhipinti	Lab	6849	Nights
	Kirsis Liquet	PCU	7740	Days
	Ana Lopez	Med/Surg	6860	
TAGALOG	Lorena Alianza-Timog	SDS	6858	Days
	Cris Hom	Lab	6848	Lab
	Jocelyn Bermejo	PCU	7740	

Hearing impaired, but not deaf : Paul Arabas, Local Coordinator, 908-876-4748

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SIGN LANGUAGE INTERPRETERS

<u>Certified</u>					
Name	County	Phone		Cell Phone	E-mail/Text Pager
1.	Lori Adams	Morris	973-584-0351	973-479-7425	theadams@optonline.net
2.	Shelley Bartush	Warren	908-454-2620	908-334-8154	None
3.	Ronnie Bernhard	Morris	973-895-2179	201-738-0994	Bernhard23@juno.com
4.	Carol Brown	Warren (Gr. Meadows)	908-637-6691	908-797-9105	None
5.	Jacqueline Davidson	Essex		201-247-7178	jd@jackiedavidson.net
6.	Lauren Kafka	Bergen	201-670-1996	201-218-9657	None
7.	Kelley Higgins-Nelson	Morris	973-492-3901	973-979-2871	Text pager: klhnelson@tmo.blackberry.net
8.	Karen Kearns	Morris		973-439-1915	Karen@karenkearns.com
9.	Maureen McGuire-Kelly	Warren		Voice/TTY: 908-835-1101	Maureen.kelly@usa.com
10.	Benay Quadrel	Morris		Voice/TTY: 973-402-1686	e-mail: benayhere@aol.com Text pager: benay@yzw.blackberry.net
11.	Wendy Ehrhardt	Warren	973-347-4326	908-652-1268	None

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<u>SIGN LANGUAGE INTERPRETERS</u>			
	Name	Phone	Cell Phone
12.	Lisa Fernley		973-691-5658
13.	Rev. Cathy Deats	Office: 908-850-4549 Home: 973-252-2160	908-500-2463
14.	Andrea Walters	Voice/TTY: 908-537-9150	908-307-0034