<table>
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<th><strong>Title of Policy:</strong> Auxiliary Aids and Services for Individuals with Special Needs</th>
<th><strong>Date revised/reviewed:</strong> 7/10</th>
<th><strong>Last revised by:</strong> Patient Relations</th>
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<td><strong>Date created:</strong> Replaces: Patients with Disabilities Available Resources 12/04</td>
<td><strong>Discipline:</strong></td>
<td><strong>Key words:</strong> Interpreter services, non-English, Deaf, Hard of Hearing, Sign Language</td>
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<td><strong>Facility:</strong> Inova Alexandria Hospital</td>
<td><strong>Approved by:</strong> Daniel Jackson, FACHE, Chief Operating Officer</td>
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**Purpose:**

Inova Alexandria Hospital (IAH) provides a wide range of assistive devices and services in order to provide equal access to services in clinical and administrative settings for all individuals regardless of their ability to communicate in spoken English. By providing these devices and services, IAH enhances its ability to provide quality care to the individuals with special needs.

**Applies to:**

All Units

**Definition of Terms:**

A companion is defined as a person who is deaf or hard of hearing and is either (a) legally authorized to make health care decisions on behalf of the patient; (b) designated by the patient to communicate, or circumstances otherwise indicate should communicate, with hospital personnel about the patient, the patient’s needs, condition, history, or symptoms; (c) authorized to help the patient act on information or instructions by hospital personnel; or (d) the patient’s next of kin or health care surrogate or such person with whom the hospital personnel ordinarily and regularly communicate concerning the patient’s medical condition and medical advice. If a patient requests an interpreter for a companion and there is a question as to whether or not the individual meets the definition as outlined above, an interpreter should be requested. It will be the policy of Inova Alexandria Hospital to offer these services as requested.

**Expected Outcomes:**

Interpreter services and/or assistive devices should be provided in all circumstances where necessary for effective communication in connection with treatment rendered by the Hospital to a patient and/or in order for the patient to receive the full benefit
of the Hospital services. Staff shall rely on the patient’s own assessment of his/her need for services.

If it is recognized or there is any reason to believe that a patient, relative, or a close friend or companion of a patient is deaf, hard of hearing, non-English speaking, visually impaired, or physically impaired the person will be advised that appropriate auxiliary aids and services will be provided free of charge. If you are the responsible health care provider, you must ensure that such aids and services are provided when appropriate. If there are any questions, call Patient Relations at 703-504-3128 between the hours of 8:30 a.m. and 5:00 p.m., Monday-Friday. At all other times, contact the Nursing Supervisor at 703-504-7575. For questions regarding Sign Language patients, contact the Manager of Sign Language Services at 703-776-7641. For questions regarding patients requiring spoken language interpreters, contact the Manager of Language Services at 703-776-7642.

**Policy:**

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<th>Items</th>
<th>Rationale</th>
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<td>IAH freely provides the following services and assistive devices for individuals who may have special needs:</td>
<td>In order to provide equal access to service in clinical and administrative settings for all persons regardless of their ability to communicate in spoken English, we will at all times have effective communication with patients and their companions by employing interpreter services and assistive devices specified in this policy.</td>
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<tr>
<td>▪ Spoken language interpreters</td>
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<td>▪ Sign language interpreters</td>
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<td>▪ Various Assistive devices (i.e., TTY/TDD, Pocketalker)</td>
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<td>▪ On-demand video interpreting (NexTalk)</td>
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<td>▪ Television services for individuals who are visually impaired, deaf or hard of hearing</td>
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<td>▪ Braille signage</td>
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<td>▪ Hearing-aid compatible phones with volume control</td>
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Every staff member providing service to patients who do not communicate in spoken English (i.e., deaf or hard of hearing, limited English proficient) is responsible for ensuring compliance with this policy and for accessing appropriate services. The Office of Health Equity will be responsible for payment of these services. Individual departments will not be charged.

**Procedure:**

**Equipment**

IAH freely provides the following services and assistive devices for individuals who may have special needs:
  
I. Sign language interpreters
  
II. NexTalk On-demand Video Interpreting (IAH ED)
III. TTY/TDDs (Telecommunication typewriters, also known as Telecommunications Devices for the Deaf) with telephone flashers

IV. Hearing-aid compatible phones with volume control

V. Television services for individuals who are visually impaired, deaf or hard of hearing

VI. Pocketalker (assistive amplification device)

VII. Telemike nurse-call system

VIII. Virginia Relay Service (This is a public service of the Commonwealth of Virginia provided for individuals who are deaf or hard of hearing)

IX. Spoken language interpreter services

X. Braille signage

XI. Presence of service animals in the hospital

Implementation (steps)

To request any of the assistive devices above, the following procedures have been established:

I. Sign Language Interpreters

A. Non-emergency requests - Monday through Friday between 8:00 a.m. and 4:30 p.m.
   1. The Interpreter Request Form, found on InovaNet, must be filled out and faxed to 703-776-3640 for non-emergency requests with three (3) business days’ notice. Requests needing more immediate attention (with less than three days’ notice) must be made by phone or page. During business hours, Monday to Friday from 8 a.m. to 4:30 p.m., please contact the Sign Language Services Manager, at 703-776-7641 or by pager at 71055. If you need services after hours, use the centralized call center, Northern Virginia AHEC, at pager 703-279-1904 to make your requests.

   B. Emergency Requests - 24 hour/day, 365 days/year
      1. Requests needing more immediate attention (with less than three business days’ notice) must be made by phone or page. During business hours, Monday to Friday from 8 a.m. to 4:30 p.m., please contact the Sign Language Service Manager, at 703-776-7641 or by pager at 71055. If you need immediate services after hours, use the centralized call center, Northern Virginia AHEC, at pager 703-279-1904 to make your requests.
      2. Please make requests for services as far in advance as possible. This will help with scheduling and reducing fees, while maximizing our ability to find the right interpreter for the assignment.

   C. "On call" sign language interpreter service planned in advance for expectant parents who are deaf or hard of hearing. On-call service can be arranged through the Sign Language Service Manager.

The following information must be provided when requesting a sign language interpreter:

A. Date, time and duration of assignment

B. Specific location (hospital, room number, floor, building) of the assignment
C. Special information to assist in identifying an appropriate interpreter (e.g., topic of discussion, type of medical procedure to be performed, communication preference)
D. Name of deaf or hard of hearing patient or companion
E. Name of hospital contact person for when the interpreter arrives.
F. For On-call service for expectant parents, the following additional information will be needed:
   - Patient’s name and name of husband or significant other
   - Patient’s telephone number
   - Expected due date
   - Hospital where delivery is expected.

II. NexTalk On-demand Video Interpreting

In the Emergency Department, remote sign language interpreters are available via internet videoconferencing, 24 hours/day. NexTalk interpreters can assist with communication until the time that an on-site sign language interpreter arrives, if necessary.

III. TTY/TDD (Telecommunication Typewriters, also known as Telecommunications Device for the Deaf) with Telephone Flashers

A. Upon request, a TTY can be installed in the patient’s room free of charge:
   1. Monday-Friday (7:00 a.m. - 3:30 p.m.):
      a. Nurse or Unit Secretary should submit an Engineering Work Request available on the Novell window.
      b. Engineering performs installation in patient room.
   2. Evenings, weekends and holiday hours:
      a. Nurse or Unit Secretary should submit an Engineering Work Request available on the Novell window.
      b. Nurse or Unit Secretary should call Hospital Operator.
      c. Operator pages Engineering on call.
      d. Engineering will contact individual requesting TTY and arrange for installation.
   3. Return of equipment after patient is discharged:
      Nurse or unit secretary should contact Engineering at x3400 to request equipment pickup.

B. Availability of TTYS for the Deaf and Hard of Hearing to the General Public, Visitors and Families
   1. Contact the Hospital Operator

C. Emergency Department:
   1. TTY is located in the Emergency Department, available upon request 24 hours a day.
   2. Telephone flashers are provided with the TTY.

IV. Hearing-aid Compatible Phones with Volume Control
The standard phone for patient use in the hospital is Model #TL-420. This number can be found on the bottom of the base of the phone. If the patient room is in need of replacement, phones are stocked in clean holding rooms or are available through the Resources Coordinator using Lawson #41140.

V. Television Services for Visually Impaired, Deaf or Hard of Hearing Patients

A. Telecaptioning Decoders for television viewing for the deaf and heard of hearing. IAH provides telecaptioning decoders for television viewing for the deaf or hard of hearing in all patient rooms.
   1. On the patient’s call button remote, push the closed captioning button to begin TV telecaptioning decoding. If you experience any problems with this function, submit an Engineering Work Request available on the Novell window.

VI. Pocketalker (Assistive Amplification Device)

A. Pocketalker
   1. The Pocketalker is best used for amplification in one-on-one situations (i.e., MD speaking with patient). It is best used for communication with people who are moderately hearing impaired.
   2. To obtain a device, contact the Patient Relations Department (x3128) Monday – Friday between the hours of 8:00 a.m. – 4:30 p.m. Equipment must be signed out and returned to the Patient Relations Department office upon patient discharge or when finished using it.

VII. Telemike Nurse-Call System

A. The nurse-call system for all patient rooms activates a light on the room number panel at the nurses’ station to indicate patient is calling for assistance.
B. Breath activated and pressure pad activated telemikes have been adapted to enable patients with paralysis or limited use of their upper extremities to call the nurse’s station.
C. To obtain a breath-activated telemike:
   1. Monday - Friday (7:00 a.m. - 3:30 p.m.) installation:
      a. Nurse or unit secretary completes an Engineering Work Request available on the Novell window.
      b. Nurse or unit secretary calls Engineering at x 3400.
      c. Engineering performs installation in patient room.
   2. Evenings, weekends & holiday hours
      a. Nurse or unit secretary completes an Engineering Work Request available on the Novell window.
      b. Nurse or unit secretary calls hospital operator to page Engineering on call.
      c. Engineering will contact individual requesting telemike and arrange for installation.
D. Return of equipment after patient is discharged:
   1. Nurse or unit secretary will contact Engineering at x3400, and request equipment pick up Monday-Friday, 7:00 a.m. - 3:30 p.m.
2. Nurse or unit secretary will call the operator to request equipment pick up evenings, weekends, and holidays. Operators will page Engineering.

VIII. Virginia Relay Service (711)

A. This is a free and confidential service which enables people who are deaf, hard of hearing or speech disabled to communicate via a TTY or other assisted telephone device with anyone who uses a standard phone. This service is available 24 hours a day, 7 days a week and can be accessed by calling 711. From inside the hospital dial 9 and then 711.

IX. Spoken Language Interpreter Services

A. When a patient/family has been identified as needing spoken interpreting services, staff present are responsible for arranging this free service to ensure clear communication and patient education.

1. Spanish staff interpreters are available Monday-Saturday from 7am-11pm at ext. 7127.
2. Trained bilingual staff (40 languages) are Inova employees who have been screened and trained as medical interpreters. If there are no medical interpreters on your unit, call the hospital operator who will refer to the interpreter language bank. Unscreened and untrained bilingual Inova employees, family members and minors may not be asked to interpret particularly for clinical information. [http://inovanet.network.inova.com/j/inovanet.srt/library/care/intro/langbank.html](http://inovanet.network.inova.com/j/inovanet.srt/library/care/intro/langbank.html)
3. Contracted interpreters (30 languages) from Northern Virginia Area Health Education Center, usually requires 72 hours notice, but will try to fulfill requests on short notice. Call 703-549-7060 (after-hours page 703-279-1904).
4. Telephonic interpretation (170 languages) provided by Language Line is available 24 hours a day, 7 days a week. A Language Line phone is located on each unit’s nurse’s station, with the hospital operator, and the Visitor Information Desk. The phones should be made available to any non-English speaking patient and family in the patient’s room or desired location to be utilized by all healthcare providers.
   a. To use, plug the Language Line phone into the most accessible phone outlet.
   b. Pick up one of the two handsets which directly dial to Language Line Services.
   c. Follow the voice prompts on the special two-handset terminal.
5. To request replacement or additional Language Line telephones, fax a [request form](http://inovanet.network.inova.com/j/inovanet.srt/library/care/intro/langbank.html) to (703) 698-2579. With questions, contact Patient Relations at ext. 3128 or the Language Services Manager at 703-776-7642.

**Special Considerations**

- The patient’s family or friends may not be used as an interpreter unless specifically requested by the patient. It is inappropriate to require, encourage or suggest these individuals be used for interpreting. Never allow minor
children (under 18) to serve as interpreters even at the request of the patient. If the patient insists that a family member/friend serve as the interpreter, document the patient’s wishes, along with the name and relationship of the person who interprets in the patient record.

- In an emergent situation where the patient’s medical condition might be compromised by waiting for an interpreter to arrive before beginning the assessment and treatment, staff should render any necessary and appropriate medical treatment, and should use their best efforts to provide the most effective communication possible until such time as a sign language interpreter or preferred language interpreter arrives. These situations must be documented in the medical record.

- It is against Inova policy to make overhead or public announcements requesting that any person who is willing to interpret provide services at a specific location.

X. Braille Signage

A. All public and patient area signage are supplemented with Braille interpretations.

XI. Presence of Service Animals in the Hospital

A. Definition

1. “Service Animal” means any guide dog, signal dog, or other animal individually trained to do work or perform tasks for the benefit of an individual with a disability, including but not limited to, guiding individuals with impaired vision, alerting individuals with impaired hearing to intruders or sounds, providing minimal protection or rescue work, pulling a wheelchair, or fetching dropped items. A service dog is not considered a pet but rather an animal trained to provide assistance to a person because of a disability.

B. Presence of service animals in the hospital

1. Access for services animals may occur in any area open to the general public including administration, lobby, cafeteria, waiting rooms, and the gift shop.
2. The decision to permit a service animal in a patient room shall be made on a case by case basis by the hospital administrator or designee. This is after consultation with the patient’s attending physician, the Patient Care Director of the unit or designee, the infection control practitioner, and the attending physician of the patient’s roommate, if any.
3. Care areas where access might be restricted include: isolation areas, care areas for immuno suppressed patients, intensive care units, operating rooms and any area with additional precautions to prevent transmission of infectious agents.
4. An individual may be accompanied by a service animal unless the animal’s presence or behavior creates a fundamental alteration in the nature of the hospital’s services in a particular area or direct threat to other persons in a particular area. A “direct threat” is defined as a significant risk to the health or safety of others that cannot be mitigated or eliminated by modifying
policies, practices, or procedures. The determination that a service animal poses a direct threat in a particular health care setting should involve consideration of the nature of the risk (including duration and severity), the probability that injury will occur, and whether reasonable modifications of policies, practices, or procedures will mitigate the risk; the individual with the disability should contribute to the risk-assessment process as part of a pre-procedure/admission provider-patient communication. Exclusion of the service dog must be based on actual behavior of the particular animal, not on speculation about how the animal might behave. Antisocial behavior by any dog/animal during any visit will immediately be grounds for removal.

5. If the decision is made to disallow access, the handler should be informed of the reason, and a written report shall be prepared describing the circumstances and reasons, and submitted to the hospital’s risk manager.

C. Handler’s Responsibilities

1. When a patient requires the use of a service animal, the handler must be prepared to demonstrate the health and cleanliness of the dog, and be responsible for the dog’s safety and control, feeding, exercising, and waste.
   a. Animal Waste: The handler shall manage the animal’s waste. If an accident occurs within the hospital, it shall be cleaned like a human blood/body fluid spill and disposed of in a red bag. Outside the hospital, solid waste will be collected in a plastic bad and disposed of in the outdoor trash receptacles.

2. Failure of the handler to meet these responsibilities may result in removal of the service dog from the premises:
   a. If a service dog must be removed from the hospital, the handler shall be notified and given the reason.
   b. The handler shall make arrangements for the care of the service dog until such time as he/she leaves the hospital.
   c. The Safety and Security Department and/or the Patient Relations Department shall be notified of the decision and may be asked to assist in the removal of the service dog.

Related Links:

Interpreter Request Form

Language Line Telephone Request Form