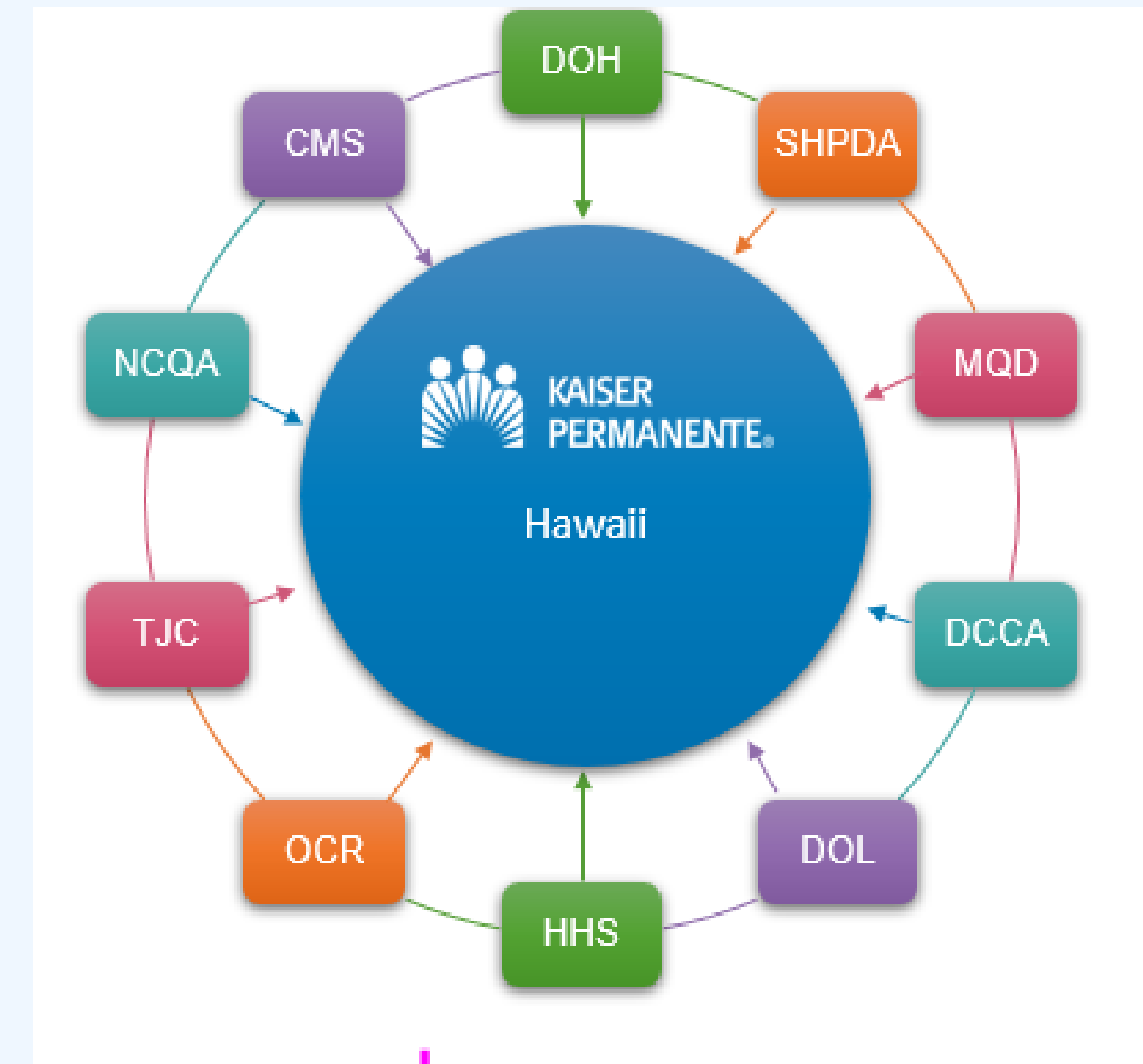


Providing Language Assistance

Compliance: Laws and Regulations

- Equal access: Kaiser Permanente (KP) provides equal access for health care services to all members and patients, including Limited English Proficient (LEP) individuals and Individuals with disabilities.
- Regulatory requirements: Health Plans, Hospitals, and Medical Groups are subject to a myriad of regulatory and accreditation requirements in the areas of nondiscrimination and language assistance.



Policies and Procedures

- To support the delivery of high-quality care and service to patients and to comply with federal and state regulations, KP has adopted a set of policies and procedures for its ADA and language assistance services.
 - [Providing Language Assistance 1600-128C](#)
 - [Equal Access to Facilities, Services, and Programs NATL.HPHO.008](#)
 - [Nondiscrimination in the Provision of Healthcare NATL.HPHO.007](#)
- All policies are published in the [KP Policy Library](#)

Interpreter Services

Language assistance guidelines

- Language services are available during all hours of operation at no charge to the patient.
- KP staff members and providers must adhere to these guidelines at all administrative and clinical points of contact.
- Please refer to the [Providing Language Assistance 1600-128C](#) policy.

Once the need for an interpreter is determined, please follow these steps:

Step 1

Verify the preferred language



Always verify the patient's preferred language including sign language, by checking the system of record first.

It is also okay to ASK in a respectful and responsive manner, if the patient has a language preference.

Step 2

Offer language assistance services to the patient



If the patient has a preferred language other than English, has communicated the need for an interpreter, or demonstrates a need for a spoken or sign language interpreter, then offer the services to the patient.

Step 3

Avoid the use of friends, family members or minors



Use of friends or family members is discouraged.

Patients may not be asked to bring their own interpreter.

Minor children cannot be used as interpreters except in extraordinary situations, for example, a medical emergency where any delay could result in harm to a patient and only until a qualified interpreter is available.


Step 4

Document the patient's preferences



Document in KP HealthConnect the use or refusal of language assistance including a patient's preferred written and spoken languages, and the need for an interpreter.

To obtain an interpreter, refer to the Interpreter Services Guidelines



Interpreter Services

For Internal Use Only

GUIDELINES FOR REQUESTING LANGUAGE ASSISTANCE
Kaiser Permanente offers free language assistance options that are free of charge and available during all hours of operation. Please utilize the vendor information below to schedule an interpreter or obtain translation services.

VENDOR	CONTACT INFO	HOURS	ADDITIONAL INFORMATION
Video Interpretation			
AMN Healthcare Language Services <i>American Sign Language and Select Spoken Languages</i>	N/A	Varies Video Language Hours	Refer to device for availability of video languages. For audio languages, provide 6-digit Client ID #250050 when prompted.
Over the Phone Interpretation			
Language Services Hawaii	808-892-3446	24/7	
Language Line	800-523-1786	24/7	Client ID # 250050
United Language Group/Propio	855-346-4810	24/7	Client ID = Employee's NUID
In-Person Interpretation			
Language Services Hawaii <i>Spoken Languages</i>	808-892-3446	24/7	<i>Important Note:</i> For in-person interpretation, the "Interpreter Services Utilization" form (#1039 6344) must be completed and signed by KP staff as proof that services were rendered. Completed form will be submitted with invoice for payment. KP staff are responsible for interfacing original (white) copy to Interpreter Services (Honolulu Medical Office Administration) and giving canary copy to the interpreter.
Hawaii Interpreting Services <i>American Sign Language</i>	808-394-7706	24/7	
Deaf/Hard of Hearing			
Relay Hawaii	711 877-447-5990 English 877-447-7261 Spanish	24/7	A TTY or Text Telephone is a special device that lets people who are deaf, hard of hearing, or speech-impaired use the telephone to communicate, by typing messages.
Translation Vendors (Written Translation)			
For non-PHI requests: Email Document.Services@kp.org		For PHI requests: Contact approved vendors. Translation Vendors	
Assistive Devices			
Hearing amplifiers and alternative communication devices may be available. Contact your supervisor.			

INTERPRETATION / LANGUAGE ASSISTANCE SERVICES

- Interpretation services must be provided free of charge and made available 24 hours a day, 7 days a week for limited English proficient patients/caregivers.
- Limited English proficient patients/caregivers must be offered interpreter services free of charge. The use or refusal of such services must be documented in the patient's medical record.
- Members/Patients are not to be asked to bring their own interpreter.
- The use of adult family member/friends as interpreters is highly discouraged. A patient may opt to use a family member/friend (age 18 or older) to interpret. However, a Provider can elect to have a qualified interpreter present to ensure effective communication occurs.
- Persons under the age of 18 should not be used as interpreters except in extraordinary situations, for example, a medical emergency where any delay could result in harm to a patient and only until a qualified interpreter is available.
- Use or refusal of language assistance services must be documented in the patient's medical record or chart, this includes when the patient uses a family or friend and minors in emergency situations.


DOCUMENTATION

The following must be documented in the patient's medical record:

- Language preferences (written, spoken and interpreter need) when obtaining healthcare/medical services.
- The use or refusal of interpreter services at each encounter.
- The type of interpreter services provided (i.e. over the phone, in person, etc.) and the contracted interpreter's ID number and/or name, and/or the family/friend's name/association.
- Language preferences (written, spoken and interpreter need) of the patient's caregiver, guardian or legal decision maker, as applicable.
- Race and ethnicity (as self-identified by the patient).
- The utilization of auxiliary aids and alternative formats, including glasses and hearing aids.
- **Scheduling/Cancelling Appointments:** In the appointment notes, document the request for interpreter to include vendor name, date requested and requestor's initials. If appointment is cancelled or rescheduled, call vendor to request a change and/or cancellation of the interpreter request. Document in the appointment notes. Note: a vendor must be notified 24 hours in advance to avoid charges.

Questions? For issues with obtaining interpreters, please contact your manager. If you are having technical difficulties, please contact the Help Desk at 808-432-4100. For any other questions, please contact Honolulu Clinic Admin at 808-432-2250.

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When accessing language assistance services, the following order should be used*:

Spoken Language

1. Contracted Phone Interpreter
2. Contracted Video Interpreter
3. Contracted In-Person Interpreter

American Sign Language

1. Contracted Video Interpreter
2. Contracted In-person Interpreter

**Unless patient specifies otherwise*

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Resources

Southern California and Hawai'i

Regional Equity, Inclusion & Diversity:

Email: Equity-Inclusion-Diversity-SCAL-HI-Rgnl@kp.org

Website: [SCal Equity, Inclusion, and Diversity](#)

SharePoint: [SCAL & HI EID – Home](#)

[Hawai'i Interpreter Services Guidelines](#)

[Video Visits Training and Job Aids | Rise 360](#)

[Hawai'i State Laws](#)

[Hawai'i Policies & Procedures](#)

Kaiser Permanente

One Compliance: [One Compliance](#)

KP Translation Services:

Email: Translation.Services@kp.org

Website: [Translation Services – Home](#)

KP Community Based Referral:

[Find Community Resources | Kaiser Permanente](#)

[California Laws and Regulations](#)

[California Statewide Policies and Procedures](#)

[U.S. Department of Health & Human Services](#)

[Auxiliary Aids & Services Playbook](#)