

Hoag Orthopedic Institute.

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Effective	12/2/2025		PRINCIPAL RISK
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			COMPLIAN
		Area (Category)	Organization - Risk Management
		Applicability	Hoag Orthopedic Institute

Auxiliary Aids and Services for Persons with Disabilities

PURPOSE:

To provide guidelines and resources for all staff who encounter persons with disabilities covered under this policy such that the staff will be able to provide medical care as needed.

SCOPE:

Applies to Hoag Orthopedic Institute (HOI)

POLICY:

1. Hoag Orthopedic Institute (HOI) will take appropriate steps to ensure that persons with disabilities, including persons who are deaf, hard of hearing, or blind, or who have other sensory or manual impairments, have an equal opportunity to participate in our services, activities, programs and other benefits.
2. The procedures outlined below are intended to ensure effective communication with patients involving their medical conditions, treatment, services and benefits. The procedures also apply to, among other types of communication, communication of information contained in important documents, including waivers of rights, consent to treatment forms, and financial and insurance benefits forms. All necessary auxiliary aids and services shall be provided without cost to the person being served.
3. All staff will be provided written notice of this policy and procedure, and staff that may have direct

contact with individuals with disabilities will be trained in effective communication techniques, including the effective use of interpreters.

PROCEDURE:

- A. **Identification and Assessment of Need:** HOI provides notice of the availability of and procedure for requesting auxiliary aids and services through notices in our brochures and through notices posted in the registration area (i.e., HOI lobby). When an individual self-identifies as a person with a disability that affects the ability to communicate or to access or manipulate written materials or requests an auxiliary aid or service, staff will consult with the individual to determine what aids or services are necessary to provide effective communication in particular situations.
- B. **For Persons Who Are Deaf or Hard of Hearing**
 1. For persons who are deaf/hard of hearing and who use sign language as their primary means of communication, the registration clerk or clinician is responsible for arranging for a qualified interpreter when needed.
 2. HOI-issued iPhones and/or iPads with Voyce App are used for video and/or audio interpreter for spoken and sign language. HOI's primary interpreter service is Voyce that provides Video Remote Interpreting (VRI) via HOI-issued iPhones using Voyce through Rover, Haiku, or Canto or via HOI-issued iPads/iPhones through the Voyce App. Many languages are offered with a video connection, however if a language is not available in video, an audio connection can be made for over 250 languages.
 - a. **To use Video Remote Interpreting using Voyce when logged onto Haiku, Canto, or Rover, do the following:**
 - i. Select the patient from the schedule, patient list, or from patient search.
 - ii. From Open Chart, select link from Summary Tab OR go to the Epic Menu (top right) and navigate to "Links" from the menu tool bar and select audio or video.
 - iii. You will be automatically redirected to the Voyce App. Review the details on the patient information page (patient name, preferred language, organization name, encounter location) and press "Next" if/once information is correct.
 - iv. The language will be preselected based on the patient's preferred language identified in Epic. Press "Next" to proceed or change the language.
 - v. Select the reason for the interpreter session from the drop-down list provided (e.g. assessment, consent, discharge, education, etc.).
 - vi. Once the language is confirmed, the system will pair you with an interpreter. An estimated connection wait time will appear.
 - vii. Once the call has ended, you may reconnect to the interpreter if needed, or press "I'm Done" to complete the session.

viii. After the session, you will have the opportunity to submit Feedback and to click "Next" to complete.

b. **To use Video Remote Interpreting using Voyce via a standalone HOI-issued device directly from the Voyce App, do the following:**

- i. From the standalone HOI-issued device (iPad/tablet), tap the Voyce icon to launch the application. Press the green "Single Sign On" to log in using your HOI credentials.
 1. Make sure the "Company" is set to HOAG. If the company code shows a different name, such as "Voyce," please click on the name and type in HOAG.
 2. Enter your HOI login credentials on the Hoag login page that will appear after you press the green Single Sign On button. Do NOT use the username and password field on the Voyce screen.
- ii. Tap the phone "Get Interpreter" icon to proceed to connect with a language interpreter.
- iii. Type in the patient's medical record number and tap "Next."
 - i. If the MRN matches one individual patient, it will appear in the first row. If there is more than one match, the option to choose will be presented. Click "Next."
 - ii. If the patient has only had one visit or encounter, it will appear in the first row on the screen. If there are multiple encounters, an option to choose will be presented. Click "Next."
- iv. The preferred language of the patient will be the default language in the field. However, this can be changed to another language, if necessary, by selecting "Change Language" and choosing from the list provided. Click "Next."
- v. Select the reason for the interpreter session from the drop-down list provided (e.g. assessment, consent, discharge, education, etc.).
- vi. Once the language is confirmed, the system will pair you with an interpreter. An estimated wait time will appear.
- vii. For video calls, once the line is connected, both cameras will be turned on and synced. Options to mute, hang up, pause video, flip camera, or use the keypad are still available.
- viii. Once the call has ended, the interpreter's name and ID will be visible along with the option to reconnect or end the session by pressing "I'm Done" to complete the session.
- ix. After each session, you must log out of the HOI-issued iPad/tablet. Navigate to the settings bar in the top right corner of the

screen and press "Sign Out."

3. On-Site Sign Language Interpreters

- a. A sign language interpreter can be requested 24/7 by calling the operator to be connected to the following resources or staff can call directly.
- b. *Note the availability of in-person interpreters is not guaranteed. Any costs associated with in-person interpreters will be charged to HOI.*
 - i. Language People - 707-538-8900, select option 2 then option 1
 - ii. LifeSigns - 888-930-7776 or after hours 800-633-8883

4. Communicating by TDD/TTY Phone: HOI utilizes a Telecommunication Device for the Deaf/TeleTYewriter (TDD/TTY) for external communication.

- a. A TDD/TTY phone is located in the Hoag Hospital Irvine Emergency Department.
- b. The TDD/TTY number for the Irvine Emergency Department is 949-450-0153.

C. Use of Family Members, Minors, and Other Patients as Interpreters

1. Some persons who are deaf or hard of hearing may prefer or request to use a family member or friend as an interpreter. However, family members or friends will not be used as interpreters unless specifically requested by that individual and after the deaf or hard of hearing person has understood that an offer of an interpreter at *no charge* to the person has been made by HOI. Such an offer and the response will be documented in the patient's record. If the deaf or hard of hearing person chooses to use a family member or friend as an interpreter, issues of competency of interpretation, confidentiality, privacy, and conflict of interest will be considered. If the family member or friend is not competent or appropriate for any of these reasons, competent interpreter services will be provided.
2. The use of minors as interpreters will be avoided unless in emergent or urgent circumstances or where the communication is limited to simple, straightforward matters such as scheduling an appointment or confirming a patient's address and telephone number.
3. Other patients will not be used to interpret, in order to ensure confidentiality of information and accurate communication.

D. For Persons Who are Blind or Who Have Limited Vision

1. Staff will communicate information contained in written materials concerning treatment, benefits, services, waivers of rights, and consent to treatment forms by reading out loud and explaining these forms to persons who are blind or who have limited vision.
2. Notify the charge nurse or a supervisor to provide aids and services such as qualified readers; lighted magnifying glasses; or other effective methods that help make visually delivered materials available to individuals who are blind or who have low vision. Note, staff are available to assist persons who are blind or who have low vision in filling out forms and in otherwise providing information in a written format.

E. For Persons With Speech Impairments

1. To ensure effective communication with persons with speech impairments, staff will provide writing materials; note-takers; TDD/TTYs; and other communication aids.

F. For Persons With Manual Impairments

1. Staff will assist those who have difficulty in manipulating print materials by holding the materials and turning pages as needed, or by providing one or more of the following: note-takers; speaker phones; or other effective methods that help to ensure effective communication by individuals with manual impairments.

G. For Persons Needing Interpreters

1. Please refer to the *Communication with Persons with Limited English Proficiency* policy.

Reference:

1. Americans with Disabilities Act of 1990, 42 U.S.C. section 12101 et seq.
2. US Department of Health & Human Services. (n.d.) *Effective Communication for Persons who are Deaf or Hard of Hearing*. Retrieved from: <https://www.hhs.gov/guidance/document/effective-communication-persons-who-are-deaf-or-hard-hearing-0>
3. U.S. Department of Health and Human Services. (December 6, 2024). Limited English Proficiency. Available at: <https://www.hhs.gov/civil-rights/for-providers/clearance-medicare-providers/example-policy-procedure-persons-limited-english- proficiency/index.html>
4. Federal Register (2024). Nondiscrimination in Health Programs and Activities. (42 CFR Parts 438, 440, 457, and 460
45 CFR Parts 80, 84, 92, 147, 155, and 156). Available at: <https://www.federalregister.gov/documents/2024/05/06/2024-08711/nondiscrimination-in-health-programs-and-activities>
5. California Hospital Association. (2024). California Hospital Consent Manual, 50th ed. California Hospital Association Publishing.

Approval Signatures

Step Description	Approver	Date
SVP/CEO Approval	Kim Mikes: VP SR AND CEO HOI : HOI ADMINISTRATION - FULL TIME	12/2/2025
Policy Management - P & P Committee Approval	Katheryn Von Bargen: ADMINISTRATIVE SPECIALIST : HOI-MED SURG JOINT - F	11/25/2025

Owner Approval

Ann Marie Svolos: PRINCIPAL
RISK ACCREDITATION &
REGULATORY COMPLIAN

10/22/2025

Applicability

Hoag Orthopedic Institute