

# WESTERN STATE HOSPITAL INTERPRETER SAFETY MANUAL

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Interpreter Name

Date

**WESTERN STATE HOSPITAL INTERPRETER SAFETY**  
**MANUAL**

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**WESTERN STATE HOSPITAL**  
**Department of Social and Health Services**  
**Policy No. 4.2.4**

Effective Date: 11/15/1979

Revised Date:

Sunset Review Date:

**Policy Title: FOREIGN LANGUAGE, HEARING, VISION AND SPEECH IMPAIRED  
SERVICES AND OTHER INTERPRETER SERVICES**

**PURPOSE:**

To ensure communication with each patient is provided in a manner in which the patient understands and to establish safety and procedural guidelines for vendor contracted interpreters providing services to WSH patients.

**SCOPE:**

All Western State Hospital staff, patients, and vendor contracted interpreters who provide services to the patients of WSH.

**DEFINITIONS:**

- A. WSH staff is defined as any staff member of the treatment team- psychiatrist, psychologist, social worker, charge nurse; or rehab manager, assigned rehab staff, nursing personnel.
- B. Alternate Language Device= ALD
- C. Certified Translation Service= CTS

**POLICY:**

Communication with patients is the cornerstone of patient safety and quality of care. All patients have the same right to information with regard to medical services and other therapies that is presented in a manner in which he or she understands. Additionally, all patients have a right to fully comprehend information about their patient rights and to provide informed consent. Whenever possible, a patient will receive a copy of his/her treatment rights in the appropriate language.

The hospital has many options available to assist in communication with patients, such as communication boards, written materials, pen and paper, interpreters, translated materials, etc. WSH patients shall receive these services at any time (24/7), when indicated.

**PROCEDURE:**

**WHEN INTERPRETIVE SERVICES ARE REQUIRED:**

Interpretive or communication services should be provided during:

- A. The initial and all subsequent regularly scheduled evaluations.
- B. Evaluations for commitment/treatment pursuant to RCW 71.05 and RCW 10.77.
- C. Treatment planning sessions or discussions of treatment.
- D. All court hearings.
- E. Discharge planning sessions, as appropriate.
- F. Prescribed therapy/counseling sessions that rely principally on language.
- G. Service of civil commitment petitions.
- H. When interpreter services are determined by treatment staff as essential to facilitate the patient's understanding of and participation in treatment.
- I. Upon the request of the patient or family member. (A patient or a family member/significant other who express desire for an interpreter must not be overruled by a WSH staff member or treatment team.)
- J. If the patient is monolingual and non-English speaking, interpretive services should always be provided.

**VENDOR CONTRACTED INTERPRETIVE SERVICES:**

**1. Expectations of WSH Staff**

- 1. WSH staff, as defined above, is responsible for ensuring that services provided by vendor contracted interpreters are delivered in a safe and appropriate manner, consistent with WSH and DSHS policies.
- 2. WSH staff is responsible for assessing each patient's need for interpreter/communication services and, if deemed appropriate, procuring these services for the patient. Staff are responsible to:
  - a. Identify each patient's preferred language for discussing health care. (The admitting physician makes the initial determination of limited English proficiency at the time of admission.)

- b. Identify whether the patient has a sensory or communication need.
  - c. Address the patient's communication needs through referral to appropriate interpreter services.
  - d. Monitor changes in the patient's communication status and adjust services accordingly.
  - e. Document assessment of patient's preferred language, any interpretive needs, interpretive services provided, and any changes in the patient's communication status in the clinical record/treatment plan.
3. Once interpreter services have been rendered, the Office Assistant 3 (OA3) will then enter the information into an SPSR in CACHE. The SPSR is necessary to process payment for service. The staff ordering the service will need to give the following information to the OA3 (upon ordering the service and after the service is delivered) for the SPSR: Patient name, provider, date of service, why the service is necessary, and, if an ongoing service, the start and end time. If the interpreter requires a signature from a WSH staff verifying the length of service, this must be completed by the ward RN, MD, psychologist or social worker.
- a. Relying on a family member or friend of the patient to provide interpretation regarding a patient's treatment or care needs is not allowed. At staff's discretion based on the circumstances, telephonic interpreter services may be used when an in-person interpreter is not available.
  - b. The WSH staff who ordered the interpreter services is responsible for alerting the charge RN, or appropriate area manager, that the interpreter has arrived and is on their way to the ward/area. The staff who ordered the interpreter services also provides the interpreter with a copy of this policy, which is in the WSH Interpreter Safety Manual and ensures they are issued an ID badge. Visitor ID badges are provide at the Communications switchboard or the CFS Sally Port entrance.
  - c. The contracted interpreter reports to the charge nurse, or appropriate area manager, and is responsible for having the Interpreter Safety Manual, which includes the Statement of Understanding Contracted Interpreter Services at Western State Hospital, taken to the area they are to provide services to.
  - d. The charge RN, or appropriate area manager, is responsible for ensuring that all interpreters who provide interpreter services are fully oriented to the ward, or other area interpreters may be providing services, and any ward/area safety concerns. The RN, or appropriate area manager, will also ensure that the interpreter is wearing an ID badge.

- e. Interpreters must complete a ward, or area orientation provided by the charge RN /their designee or the appropriate area manager and sign the Statement of Understanding Contracted Interpreter Services at Western State Hospital, acknowledging awareness of the following requirements, i.e., that the interpreter will:
  - i. Never be alone with a patient, either in patient care areas or on grounds.
  - ii. Follow all staff directives for safety and security.
  - iii. Never give an item to a patient without staff permission, including food or gifts, even if requested by the patient. Will never purchase an item on behalf of a patient.
  - iv. Immediately alert staff of a potential dangerous situation or if patient expresses thoughts of harming self or others.
  - v. If injured, immediately inform the charge RN or responsible area manager. Also, report all injuries, including exposure to airborne or blood borne pathogens, to the Security Department, X2692, and give a copy of the incident report to the interpreter's employer.
  - vi. Not engage other patients (beyond courtesy exchanges) other than the patient for whom the interpreter is providing services.
  - vii. Translate all patient responses accurately. Interpreters shall always thoroughly and faithfully render the source language message, omitting or adding nothing, giving consideration to linguistic variations in both source and target languages, conserving the tone and spirit of the source language message.
  - viii. When interpreting during active treatment sessions, interpret for the patient the entire content of the active treatment discussions, including all staff and other patient communications.
  
- f. The charge nurse, or responsible manager, verifies the signed Statement of Understanding, along with the manual and will send to the appropriate Center Director administrative office who will maintain a file of these forms. This process will occur where each center interpreter services are provided (e.g., if interpreter provides services on F5, he/she will have to repeat this process if now providing services on C5).
  
- g. Interpreters are used to facilitate communication between patients and staff only, not to augment staffing or as a substitute for staff. This means interpreters are never to be alone with their assigned patients anywhere in patient care areas or on the WSH grounds. All interpreters will be supervised in all areas they provide services. All WSH staff members are responsible for ensuring interpreters do not go into rooms alone with patients. Interpreters are never to be used as patients' assigned 1:1 or monitoring staff. Staff should not ask interpreters to engage with patients to whom they have not been assigned.

- h. WSH Staff will terminate active treatment interpreter service provisions if a patient is unwilling or unable to attend treatment during scheduled treatment hours. If a patient does not participate in active treatment, interpreter services will still be scheduled as needed for medical appointments, legal issues, and treatment team conferences.
- i. If a WSH staff observes an interpreter who is not following WSH or DSHS Policies, or acting in an otherwise unsafe or harmful manner, that staff is to immediately report to RN on the ward, group leader, or recovery center manager; interpreter services will be terminated, and WSH staff will complete an Administrative Report Of Incident (AROI) consistent with the WSH policy 1.1.7.

**2. Expectations of Vendor Contracted Interpreters**

- 1. A WSH Visitor Badge will be issued and must be worn by the interpreter at all times while on WSH grounds.
- 2. Interpreters must also adhere to professional conduct and follow Washington State standards and regulations regarding behavior in state facilities or on state grounds, including:
  - a. All interpreters must complete the Security and Safety 12 minute video.
  - b. No smoking in state buildings
  - c. No use of alcohol or illegal drugs in the performance of this conduct or on state grounds or facilities.
  - d. No firearms or explosives in state buildings or on state grounds.
  - e. Maintain behaviors consistent with state Ethical and Professional Conduct Standards (see DSHS Administrative Policy 18.64.).
  - f. Dress professionally.
  - g. No personal cell phone use in patient care areas or electronic devices in patient care areas.
  - h. Photographs/videos may not be taken.
  - i. Gratuities are not accepted and cannot be given to the patient per code of ethical conduct.
  - j. All interpreters must pass the background check pursuant to requirements under state contract.

**INTERPRETIVE SERVICES AVAILABLE:**

- A. Certified language interpreter services are available through a mandatory contract administered by the Health Care Authority. If this contract cannot fill a staff request, he/she may use the Department of Enterprise Services spoken language interpreter services contract. For contracted interpreter services (either via phone, video, or in person), the hospital receives assurance that the

contract includes information about how the service provider defines competencies consistent with WSH's defined expectations. (TJC Standard LD.04.03.09 specifically addresses the provision for the hospital.)

- B. The primary spoken language interpreter vendor is CTS Language Link. Please refer to the WSH intranet for further instructions on accessing interpreter services through CTS or other interpreter service companies.
- C. Staff must first attempt to attain spoken language interpreter services through CTS. If a CTS interpreter is unavailable, contact the next source vendor on the WSH Intranet interpreter list.
- D. If face-to-face interpretive services are not available, telephonic interpreters are available and can be accessed by calling the WSH Switchboard. Telephonic interpreters will be utilized for weekends, holidays, evenings, or for emergencies during normal business hours.
- E. Sign language interpreters must be certified by The Office of Deaf and Hard of Hearing. The Office of Deaf and Hard of Hearing services shall coordinate testing for the American Sign Language.
- F. WSH also maintains and has available for use by hearing impaired patients, a Telecommunications Device for the Deaf (TDD-TTY) which allows communication via telephone and ALDs to facilitate one-on-one and group communication. This device can be obtained through Switchboard or RN4 on the unit.
- G. There are also a number of WSH staff who are who are certified in a foreign language and can assist in interpretive services to facilitate treatment. The list of WSH staff certified is maintained by the Human Resources Department and is available at the WSH Switchboard. WSH employees may qualify to be a certified language interpreter by taking the DSHS written and oral language test in their chosen foreign language with supervisor approval. When a staff is utilized as an interpreter, multilingual assignment pay will be authorized. Staffs approved to provide interpreter services must have an updated position description form indicating this information. The employee must inform his/her supervisor and HR if he/she chooses to terminate these services. WSH may suspend or cease staff providing interpreter services if the duties interfere with job requirements or if services are deemed unnecessary or inappropriate. Please see HR for specific questions.

## **RESPONSIBILITY:**



The Director of Social Work will be responsible for implementing and monitoring this policy.

**SOURCE:**

TJC HR 01.02.01 EP 1

PC 02.01.21 EP 1, EP 2

TJC Standard LD.04.03.09

RC 02.01.01 EP 1, EP 28

RI 01.01.01 EP 28, EP 29

RI 01.01.03 EP 1-3

Title VI, Civil Rights Act, 1964

RCW 71.24.035(d)

RCW 74.04.025

DSHS Administrative Policy 6.12, 7.03 and 7.07

DSHS Personnel Policy 5.14

DSHS and WSH Minority Affairs Initiative

WSH Policy 1.1.7

<http://asd.dshs.wa.gov/RPAU/documents/Admin-Policy/18-82.htm>

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Ronald Adler

Date

Chief Executive Officer

## BEHAVIORAL SAFETY AWARENESS

**SITUATIONAL AWARENESS** is the ability to take in information about those around you, your surroundings as well self-analysis, interpret that information and act accordingly for your safety.

**SITUATIONAL AWARENESS** while in patient care areas or delivery of interpreter services is essential. Always keep your safety in mind. If you think a potential behavioral outburst is ready to occur, vacate the area and go behind the nursing station; the appropriate ward staff will handle the situation.

***BE AWARE OF YOUR SURROUNDINGS AND ALWAYS HAVE AN ESCAPE ROUTE PLANNED.***

**THE DANGER ZONE** is a space within which a person can grab, hit or kick you without taking a step toward you.

**THE SAFETY ZONE** is the space around an upset person that would require the individual to take at least one step to reach you or other members of your team.

**STAY IN THE SAFETY ZONE** when dealing with potentially aggressive or unpredictable patients.

***THE INTERPRETER AND PATIENT ARE TO BE UNDER WSH STAFF SUPERVISION AND PRESCENCE AT ALL TIMES. IF LEFT ALONE WITH THE PATIENT, DISENGAGE AND GO TO THE NURSING STATION OR OUT OF THE PATIENT CARE AREA UNTIL SUPERVISION IS REINSTITUTED.***

## Western State Hospital Emergency Code Guide

Designated Code	Event	Definition	Hospital Procedure
<b>CODE RED</b>	<b>FIRE</b>	<b>Code Red</b> is announced when there is an indication of a fire. Signs of a fire may include observation of smoke and/or flames; smelling smoke or other burning material; or feeling unusual heat on a wall, door or other surface. The Communication Department will announce the location of the Code Red upon verification of an actual fire in the building (s) affected.	<b>CALL EXT 2222</b>
<b>CODE BLUE</b>	<b>HEART OR RESPIRATION STOPPING</b>	<b>Code Blue</b> is requested when a patient is found in cardiac or respiratory arrest. <b>CODE BLUE</b> is consistently used in all locations/departments of the hospital.	<b>CALL EXT 2222</b>
<b>RAPID RESPONSE TEAM</b>	<b>MEDICAL RAPID RESPONSE TEAM</b>	<b>Rapid Response Team:</b> Staff requests the Rapid Response Team through the Communications Department who call, via the paging system. This team of highly skilled medical professionals experienced in responding to emergency situations to assist patient/staff. The team will assess, stabilize, assist with communication, educate, support, provide advanced nursing skills, and assist with transfer to community hospital if necessary. The team is called when there had been a sudden change in patient condition, choking, chest pain, prolonged seizure activity, or when the nursing/clinical staff thinks the patient “just doesn’t look right.” Communications will not call 911 for a Medical Response Team call.	<b>CALL EXT 2222</b>
<b>CODE GREEN</b>	<b>COMBATIVE PERSON</b>	<b>Code Green</b> is requested and announced by the Communications Department to communicate and mobilize a response to protect patients, staff and property in the even that a person becomes combative.	<b>ACTIVATE PERSONAL ALARM PENDANT OR CALL 2222</b>
<b>CLEAR</b>	<b>TO CLEAR CODE</b>	<b>Clear Code:</b> When the codes are clear, Communications will page the “code name” and then announce “clear” to indicate the emergency situation is over.	
<b>On grounds from cell phone 756-2656</b>			

Statement of Understanding  
Contracted Interpreter Services at Western State Hospital

This form should be completed upon the initiation of any new interpreter service.

**As a contracted vendor interpreter providing services for patients at Western State Hospital (WSH), I agree to the following (please initial):**

\_\_\_\_\_ I have completed a ward orientation provided by WSH staff in the patient care area for which I'm assigned and have been given a copy of the WSH Interpreter Safety Manual.

\_\_\_\_\_ I have been provided with a copy of WSH Policy 4.2.4, "Foreign Language, Hearing, Vision and Speech Impaired Services and Other Interpreter Services."

\_\_\_\_\_ I will wear my issued WSH Visitor Badge at all times while on WSH grounds.

\_\_\_\_\_ I agree to all of the following requirements:

- I will never be alone with a patient, either in patient care areas or on grounds.
- I will follow all staff directives for safety and security.
- I will never give an item to a patient without staff permission or purchase an item on a patient's behalf.
- I will immediately alert staff of a potential dangerous situation or if a patient expresses thoughts of harming self or others.
- If injured, I will immediately inform the charge RN.
- I will not engage other patients (beyond courtesy exchanges) other than the patient for whom I'm providing services.
- I will interpret all patient responses accurately. I will always thoroughly and faithfully render the source language message, omitting or adding nothing, giving consideration to linguistic variations in both source and target languages, conserving the tone and spirit of the source language message.

- When interpreting during active treatment sessions, I will interpret for the patient the entire content of the active treatment discussions, including all staff and other patient communications.

**Interpreters must also adhere to professional conduct and follow Washington State standards and regulations regarding behavior in state facilities or on state grounds. Therefore,**

\_\_\_\_\_ I agree to all of the following:

- No smoking in state buildings.
- No use of alcohol or illegal drugs in the performance of this conduct or on state grounds or facilities.
- No firearms or explosives in state buildings or on state grounds
- State Ethical and Professional Conduct Standards (DSHS Administrative Policy 18.64.)
- Professional dress.
- No use of personal cell phone in patient care areas.
- Report all injuries, including exposure to airborne or bloodborne pathogens, to the Security Department, X2692, and give a copy of the incident report to your employer.
- Photographs/videos may not be taken.
- Gratuities are not accepted and cannot be given to the patient per code of ethical conduct.

\_\_\_\_\_ I am also aware that all interpreters must pass the background check pursuant to requirements of the contract.

_____	_____	_____	_____
Printed Name	Signature	Agency	Date

Name of WSH Staff who ordered interpreter services:

_____	_____	_____
Staff	Job Title	Ward/Area

Name of WSH Staff providing orientation to ward and WSH Interpreter Safety Manual:

_____ Staff	_____ Job Title	_____ Ward/Area
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[WSH staff ordering interpreter service will send this completed form to the appropriate Center Director.]