

## **Guide for Effective Communication in Health Care**

## **For Patients**



#### A Guide for Effective Communication in Health Care

#### **Patients**

It is important for your health and well-being that you communicate clearly with your doctors and staff. Asking questions can avoid mistakes and misunderstandings and help you to get the safest and best care possible. The more you understand about your own health, the better decisions you and your health care team can make. This is known as effective communication.

Effective communication is when information between two or more people is shared or exchanged and each person is able to fully understand and make decisions based on that information. This is often a process that requires going back and forth with questions and answers until everyone has a clear understanding.

This Guide will help you to understand:

- What is needed for effective communication?
- What is a Communication Access Plan (CAP)? Why is it important?
   How should it be used?
- What are the "auxiliary aids and services" that may help you to communicate?
- What are your legal rights to effective communication?
- How to get what you need for:
  - Emergency Department visits
  - Inpatient hospital stays
  - Outpatient appointments
  - Tests and procedures

You can print information from this Guide. You can also give the Provider section of the Guide to your health care team to help them learn more about your communication needs.



# **Communication Access Plan (CAP)**

Please alert all staff and include in Medical Record								
NAME OF PATIEN	Γ:		DA	TE OF BIRTH:		MRN: (Offic	ce Use)	
Which Describes You?								
☐ Hard of Hearing ☐ Deaf ☐ DeafBlind ☐ Low Vision								
Which Device(s) Do You Use?								
Hearing Aid(s) Cochlear Implant(s) Other Implant(s):	☐ Right	□ Left						
What Do You Need Hospital/Office to Provide?								
<ul><li>□ Pocket Talker</li><li>□ Captioned Phon</li><li>□ TTY (Hospital O</li><li>□ Other Alerts or A</li></ul>	nly) 🗆 Video	Phone						
What Services Do	You Need?							
<ul> <li>□ Communication</li> <li>□ Communication</li> <li>□ Sign Language I</li> <li>□ Tactile Interprete</li> <li>□ Video Remote Ir</li> <li>□ Other:</li> </ul>	Access Realt nterpreter er		ation	(CART)				
Waiting Room Prac	ctice							
When it is time for me to be seen by my hear care provider:				<ul> <li>□ Provide a vibrating pager, if available</li> <li>□ Come speak to me face-to-face</li> <li>□ Write me a note and hand it to me</li> </ul>				
For scheduling/follow up communication, please contact me by:								
☐ Patient Portal	☐ Email		□Т	☐ Text		U.S. Mail		
☐ Cell Phone	☐ Home Ph	one	□ <b>v</b>	ork Phone	□ Vi	deo Phone	☐ Relay	
Notes:								



# Communication Access Plan (CAP) Instructions for Patients and Providers

#### **Patient Instructions**

#### What Is a Communication Access Plan?

A Communication Access Plan (CAP) is a one-page form to let your doctors and health care team know about your hearing status and the communication aids and services needed.

#### Why Is the CAP Important?

Communicating clearly with your health care team helps you get the best and safest care possible. When you are part of and understand all discussions about your health, you will make better decisions.

#### How Do I Use the CAP?

- Bring a copy of your CAP to your appointment.
- Review the CAP with your doctor and health care team to be sure you have the aids and services you need.
- Ask staff to make sure your CAP is added to the Electronic Medical Record (EMR) or paper chart.

#### **Provider Instructions**

#### What Is a Communication Access Plan?

A Communication Access Plan (CAP) is a one-page form that will document your patient's hearing status and communication needs. A completed CAP can help ensure that you and your patient communicate effectively using the appropriate aids and services.

#### Why Is the CAP important?

Delivering the best and safest care is only possible when patients can fully participate in and understand all discussions about their health and well-being and make informed decisions.

#### How Do I Use the CAP?

- Ask your patient to fill out a CAP.
- Review the CAP with your patient.
- Identify what aids and services you will need to provide.
- Include the CAP in the Electronic Medical Record or paper chart and inform all referrals that a CAP exists.

For additional information see **Guide for Effective Communication in Health Care**.



#### **Communication Aids and Services**

#### **Patients**

Making sure you have the aids and services you need for *effective communication* is the responsibility of the hospital, institution, facility, or practice. You and your family cannot be asked to pay for aids or services.

Effective communication is when information between two or more people is shared or exchanged and each person is able to fully understand and make decisions based on that information. This is often a process that requires going back and forth with questions and answers until everyone has a clear understanding.

**Assistive Listening Devices (ALDs):** An ALD will make the voice of the people you are speaking with louder when they speak into a small microphone. If you have a pocket talker, FM system or other ALD, bring it with you to your appointment. If you do not have an ALD, ask staff if a pocket talker is available. (See Pocket Talker below)

**Amplified Phones:** An amplified phone will make the voice of the person you are speaking with louder.

**Captioned Phones:** If you are using a captioned phone, you can read what the person you are speaking with is saying on the phone screen. Captioning services are also available on some smartphones.

**CART (Communication Access Realtime Translation):** A CART captionist will type the discussion you have with your doctor or staff so you can read it on a laptop, tablet, or smartphone. CART can also be used remotely, meaning that the captionist is at another location using the internet to connect.

**Dry Erase Board (or Whiteboard):** A small board that can be written on with an erasable marker.

**Hearing Loop:** If your hearing aid or cochlear implant has a telecoil, and the room you are in has a special wire called a loop, you will be able hear and understand more clearly.

**Pen and Paper:** Pen and paper may be helpful for very short communications or as a back-up if there are no devices or equipment that can be used.

**Pocket Talker:** A pocket talker is a small assistive device with a microphone, amplifier, earbuds or headset and a neckloop for hearing aids that have telecoils. It makes the speaker's voice louder to help you hear better. Many hospitals have pocket talkers for you to use.

**Relay Calls:** You can call a specially trained relay operator who will type what a person is saying while you read it on the phone screen.



**Tablet, Computer, Smartphone:** Ask your doctor's office or hospital staff if they have an iPad or other tablet that can be used for typing discussions. If not, you might want to bring your own. You may also be able to use the voice activation option on a smartphone.

**UbiDuo:** Using two separate screens with keyboards, you and the doctor or staff member can face each other while they type and you read what they are saying on the screen.

#### **Interpreting Services**

- The hospital, facility, or practice is responsible for setting up and paying for interpreting services.
- The hospital, facility, or practice cannot ask or require you to bring your own interpreter.
- The hospital, facility, or practice should not ask your friends or family to help you and your health care team communicate. However, in case of an emergency, family or friends may be asked to help.

American Sign Language Interpreter: If you or a family member communicate in American Sign Language, you can ask for an ASL/English interpreter. An ASL interpreter can help you and your health care team communicate. If you need interpreting services, ask for nationally certified interpreters.

**Certified Deaf Interpreter:** A CDI is a deaf person who has been nationally certified to provide interpreting services to deaf people who may not be able to communicate well in American Sign Language. If you or a family member use sign language from another country, or have difficulties communicating in sign language, you may ask for a CDI. A CDI typically works with a hearing ASL interpreter.

**Low-Vision Interpreting:** If you or a family member have low vision, you may need the sign language interpreter to stand or sit very close to you so you can see the signs.

**Oral Interpreter:** If you or a family member are very good speechreaders, you may want to request an oral interpreter. An oral interpreter repeats what the speaker is saying, using different words that are easier to speechread. Oral interpreters and sign language interpreters *do not* provide the same service. Be sure to let the hospital or facility staff know which service you need.

**Tactile Interpreting**: If you or a family member use sign language and are DeafBlind, you can request a tactile interpreter. A tactile interpreter has a DeafBlind person put their hands lightly over theirs so signs and fingerspelling can be felt.

**Video Remote Interpreting (VRI):** VRI is an interpreting service with the interpreter, in a different location. However, you may still need an on-site interpreter in medical and mental health settings. See <u>National Association for the Deaf and VRI</u>. There are strict <u>guidelines for the use of VRI services</u> which hospitals and institutions must follow.

Note: The Americans with Disabilities Act (ADA) refers to communication aids and services as Auxiliary Aids and Services



## **Communication in the Emergency Department**

#### **Patients**

Emergency Department (ED) visits can be scary. The ED can also be noisy and busy, making communication even more difficult than usual. It is very important that you and your nurses and doctors understand each other.

A **Communication Access Plan (CAP)** will help you get the services you need so you can understand what is being said.

By law, the hospital must give services to you, your family, and your caregivers to help with communication so you can understand your treatment options, make good decisions, and receive the best and safest care possible. You cannot be asked to pay for aids or services used during your Emergency Department visit.

#### Triage/Registration

- Tell staff you are hard of hearing or deaf.
- Ask staff to look directly at you when speaking.
- Ask for the aids and services you need so you will understand all information.
- Ask that your CAP be included in your Electronic Medical Record or paper chart.
- Ask for a copy of the questions that will be asked during registration.
- Remind staff you will not hear your name when it is called. Ask how they will let you know it is time for you to be seen:
  - Vibrating pager
  - Staff person will come to you
- Ask that a sticker with a symbol showing you are hard of hearing or deaf be placed on your wristband or ask if a second wristband can be used to show your hearing status.
- Ask questions and make sure you get them all answered.
- Repeat back information to make sure you have understood.
- Ask a family member, caregiver, or friend to help if you cannot manage communication even with aids and services.

#### **Treatment Area/Bedside**

- Ask to have a sign posted over your bed that shows you are hard of hearing or deaf.
- Ask to wear your hearing aid(s) or cochlear implant(s) while in the Emergency
  Department. If this is not possible, ask that device(s) be put into a container with
  your name on it or given to a family member or friend.
- Tell staff the best way to get your attention.
- Ask staff their name and role (nurse, doctor, etc.) or ask to see their ID badge.
- Ask for printed or clearly written information whenever possible.



## **Tests, Procedures, Surgery**

- Ask your doctor if the anesthesia (medicine to put you to sleep or numb part of your body) or other medicines can make your hearing, balance, or tinnitus worse.
- Ask for a printed or written step-by-step explanation of what is going to be done.
- Ask all questions before staff put on their surgical masks.
- If you will be awake during a procedure, discuss with staff how they will communicate with you.

#### Examples:

- Dry erase board (whiteboard)
- Turning lights on and off
- Gently tapping you on the shoulder
- If you have a cochlear implant, ask your doctor if it is safe to have an MRI.
- Before having an MRI, ask for earplugs, a headset, or both to protect your hearing.

## **Leaving the Emergency Department (Discharge and Follow-up)**

 Be sure to get all information and instructions in writing before you leave the Emergency Department.



## **Communication in Inpatient Settings**

#### **Patients**

If you are hard of hearing or deaf, your inpatient stay in a hospital or other facility can be especially stressful. Planning ahead by filling out a **Communication Access Plan** (**CAP**) can help you to get the aids and services you need. Hospitals or other health care facilities cannot ask you to pay for aids and services you use during your stay.

Hospitals and health care facilities must follow laws that protect your rights to receive all information in a way you can understand. Clear communication helps avoid misunderstandings, keeps you safe, and helps you make better decisions.

## Pre-Admission: Planning Your Stay at a Hospital or Facility

- Contact the Patient Representative or Patient Advocate and ask which department or staff member is responsible for arranging the services you need. Give them a copy of your CAP.
- Ask what aids and services the hospital or facility will have for you.
- Have staff give you information in writing about what to expect during your stay.

## **A Planned Hospital Stay**

- Bring your pre-admission paperwork along with your CAP.
- Bring your assistive listening devices (ALDs), batteries, and a container with your name on it.
- Bring stickers for your wristband with a symbol showing you are hard of hearing or deaf.
- Bring pen and paper.
- You may want to print information from the Provider section of this Guide to give to your doctors and staff.

## **Admission from the Emergency Department**

- Make sure patient escort/transport know about your hearing status and how to communicate with you when you are being transported for tests, to your room, or to another facility.
- Make sure you have all your personal communication aids with you
  - (ALDs, batteries, hearing aids, etc.).

## **During Your Stay in the Hospital/Facility**

 Give a copy of your CAP to the department or staff member who will make sure you get the communication aids and services you need. Ask to have the CAP added to your Electronic Medical Record or paper chart.



- Let staff know you expect to be included in all discussions and decisions about your medical care.
- If you are unable to get the help you need, ask to speak with a Patient Representative or Patient Advocate.
- Check to see that the following are in place:
  - Sign over bed stating you are hard of hearing or deaf, or written on the whiteboard in your room
  - Wristband with universal "hearing loss" sticker or ask for a second wristband showing your hearing status
  - Captioned phone
  - Visual alerts in case of an emergency; other devices for alerts as needed
  - Instructions on how to set up captions on the TV and patient education videos
- Let staff know you will not be able to hear over an intercom.
- Tell staff the best way to get your attention before they speak with you.

#### Some options are:

- Turn lights on and off
- Stand a few feet away and wave their hand
- Tap you gently on the shoulder
- Make sure ALDs, cochlear implants, hearing aids, and other belongings are kept safe.

## **Leaving the Hospital (Discharge)**

 Get all information and discharge instructions in writing before you leave the facility.



## **Communication in Outpatient Settings**

#### **Patients**

When scheduling outpatient appointments, let staff know what aids and services you will need so you, your doctor, and your health care team can communicate clearly. Services and aids you use for your visit, will be at no cost to you, your family, or your caregiver. A **Communication Access Plan (CAP)** should be filled out and become part of your medical record. This will save time and help you feel less stressed and frustrated. It should make communication easier and make your visits go more smoothly.

## **Scheduling Appointments**

## **Online Scheduling**

- Check to see if your doctor's office has online scheduling through their website or a patient portal.
- Check to see if you can email or fax your CAP to the doctor's office before your appointment.

## **Phone Scheduling**

- Tell the receptionist you are hard of hearing or deaf.
- When using a captioned phone or relay operator, let the receptionist know your call may take longer.
- Tell the receptionist your communication needs for the appointment. If possible, fax or email a copy of your CAP.
- Ask for the name of the office manager in case you need help getting the services you need.
- Ask if you can fill out medical forms online before your appointment.
- Repeat back the date and time of your appointment.
- Ask that an email confirmation be sent.
- Ask for the text number or email address you should use if you will be late.
- You may want to share information from the Provider section of this Guide with your doctors and staff.



## **Managing Appointments**

#### When You Arrive

- Remind staff you are hard of hearing or deaf.
- Give them a copy of your CAP.
- Ask that a sticker be put on your paper chart showing that you are hard of hearing or deaf.
- Discuss your CAP with staff and decide what aids and services you will use for your appointment.
- Ask if staff will use a vibrating pager or come to where you are sitting when it is time for you to be seen.

#### Your Visit with Your Doctor or Other Health Care Staff

- Tell your doctor that you have hearing loss and give staff your CAP.
- You may want to print information from the Provider section of this Guide to give to your doctors and staff.
- Ask questions and make sure you get them all answered.
- Repeat back information to make sure you understood.
- Ask if any new medicine you are given might make your hearing, balance, or tinnitus worse (ototoxic reaction).
- Before having an MRI, if you have a cochlear implant (CI), be sure to tell your doctor.
- Ask that all information about your treatment plan and medicines be given to you in writing.
- Ask for the name, phone or text number, or email address of someone to contact if you have questions about your care.



## **Communication During Tests and Procedures**

#### **Patients**

- Remind all staff that you are hard of hearing or deaf.
- Give staff a copy of your Communication Access Plan (CAP) and ask to have it added to your Electronic Medical Record or paper chart.
- Bring stickers with a symbol showing you are hard of hearing or deaf to put on your paper chart and wristband.
- Ask to wear your hearing aid(s) or cochlear implant(s) until tests or procedures begin. If this is not possible, ask staff to put the devices in a container with your name on it.
- Ask for a written explanation of what the doctor, nurse, or technician will be doing.
- Make sure you get answers to all your questions before staff put on their surgical masks.
- Ask your doctor if the anesthesia (medicine to put you to sleep or numb part of your body) can make your hearing, balance, or tinnitus worse.

## **Communicating in Radiology**

#### X-ray / CT Scan / MRI

- If you have a cochlear implant(s), ask your doctor if you can have an MRI.
- Ask your doctor if there will be a staff person in the room to give you instructions during the test. If so, talk to staff about how they will communicate with you.

#### Some options are:

- Write on a dry erase board (whiteboard)
- Turn lights on and off
- Gently tap you on the shoulder
- Ask for earplugs and/or a headset to protect your ears during an MRI.
- When your test or procedure is finished, ask staff how you will get your results using the CAP to discuss options.



## Rights and Responsibilities

#### **Patients**

## **Your Rights**

Every patient has rights. federal, state, local laws, and guidelines protect you if you are hard of hearing or deaf to make sure you receive information in a way you can understand. This is called *effective communication*.

Effective communication is when information between two or more people is shared or exchanged and each person is able to fully understand and make decisions based on that information. This is often a process that requires going back and forth with questions and answers until everyone has a clear understanding.

Although medical staff will make the final decisions as to what services they will provide, they need to include you in the discussion. You should work together to make sure your communication needs are met.

Your family and caregivers also have the same rights to aids and services so that they can be included in your care and treatment (Department of Justice, 2005).

**Americans with Disabilities Act (ADA)** Title III, says that all health care providers (including private doctor and dentist offices) must provide aids and services to hard of hearing, deaf, and DeafBlind patients so they can communicate clearly. For more information, see <u>ADA</u>.

**Section 1557 of the Affordable Care Act** Section 1557 is the nondiscrimination provision of the Affordable Care Act (ACA). The law prohibits discrimination on the basis of race, color, national origin, sex, age, or disability in certain health programs or activities.

**The Joint Commission (TJC)** is a nonprofit organization that makes sure hospitals have high standards of care for patients, their families, and caregivers. Hospitals are expected to follow TJC guidelines. This link will show you what hospitals need to do to provide access to effective communication: A Roadmap for Hospitals. TJC "Roadmap".

**Centers for Medicare and Medicaid (CMS)** is part of the Department of Health and Human Services. As a federal agency, CMS has many programs that help people get low-cost health care services.



## Your Responsibilities

#### Have a Plan

If you have a plan before you see your doctor, you will feel more comfortable and less anxious. Review this Guide to make sure you know what to bring to your appointments and how to get the services you need.

#### Be Willing to Share

It is important to tell your doctors and staff that you are hard of hearing or deaf. You may not always feel comfortable doing this, but it can help you get the best possible care and keep you safe.

#### Try to be Patient

It will take time for your health care team to understand your communication needs. You may feel frustrated and even angry at times. Take a deep breath and continue to educate them until you get what you need.

#### Be Sure to Participate

You are the expert in what it is like to be hard of hearing or deaf and what you need to communicate. Your health care team members are the experts in medicine and treatment. By working together, you can get the communication aids and services you need.

## Filing a complaint

While hospitals, facilities, and practices have the responsibility, by law, to provide aids and services to hard of hearing and deaf patients, families, and caregivers, it is your responsibility to take action when your needs are not being met. If your rights are being violated (you are not provided the services you are legally allowed), you have the right to file a complaint.

#### **ADA Complaint**

#### The Joint Commission Complaint

You may also file a complaint with CMS and your state's Department of Health.

