Deaf and Hard of Hearing Cultural
Misconceptions/Nuances

ASL – Aspects of the Language

Video interpretation rules and regulations

When to use VRI

VRI best practices
The biggest misconception about ASL is that ASL is a universal language.
MYTH #2
Person can understand speech reading.
(lip reading)

MYTH #3
Speaking slowly will help.
**MYTH #4**  
Speaking in the third person is fine.  

“Interpreter, please ask Mr. Smith why he is here.”

**MYTH #5**  
Family and friends are qualified to interpret.  

Seen frequently. May lead to errors and liability.
ASL — ASPECTS OF THE LANGUAGE
What does the National Association for the Deaf (NAD) think about VRI?

“VRI is a tool that may be used by hospitals and other medical entities to ensure immediate communication access”

But

• On-site interpreters should be used first
• If VRI is used, make sure you consider policy, procedure, and technology.

https://nad.org/issues/technology/vri/position-statement-hospitals
What does the Joint Commission say about VRI?

**Nothing!**

Joint Commission standards require “qualified” interpreters for effective communication.

Auditors may check to see if you are following hospital policy on when to use VRI.
What does the Department of Justice think of VRI?

• Entities can choose VRI or on-site
• VRI can be useful in rural areas where on-site interpreters may be difficult to obtain.
• May be cost advantages

However,

“VRI will not be effective in all circumstances”

http://www.ada.gov/effective-comm.htm
DOJ (continued)

• Give primary consideration to the choice requested by the patient. The state or local government must honor the person's choice, unless it can demonstrate that another equally effective means of communication is available, or that the use of the means chosen would result in an undue burden.

• The goal is to provide an aid or service that will be effective.

http://www.ada.gov/effective-comm.htm
DOJ (continued)

http://www.ada.gov/effective-comm.htm
Why Use VRI?

- May provide needed languages to rural areas
- Medical consideration: Highly infectious patients
- May be faster in certain situations: Last minute procedures
- May help in-person interpreters focus on critical patient encounters
- May provide cost savings
Create a policy for VRI

- When to use:
  - Employee
  - Agency
  - Phone
  - Video

Video Interpretation is not intended to take jobs from in-person interpreters
Equipment

- D/HH should have access to VRI carts - 24/7 (Bedside ideal)
- Place one unit in ED
- Additional units in areas of higher usage
- Nurse Manager in charge of VRI unit
- Check back in for charging
Using VRI

- Position unit in front of the patient so they see screen
- Nurse/Doctor stands behind or right next to screen
- Maximize window
Equipment Considerations

- Screen Size
- Integrated Webcam + Speakers
- Portability
- Security
- Charging
- VRI App
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THANK YOU