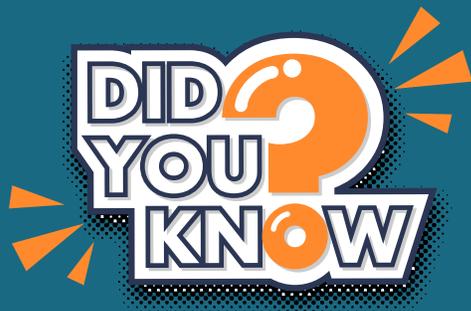


# WORKING WITH A DEAF OR HARD OF HEARING PATIENT



- If a Deaf person requests an American Sign Language (ASL) interpreter, by law (American Disabilities Act), the clinic is required to provide one
- There are two ways you can work with an interpreter, in-person or video relay interpreter (VRI, also known as “iPad interpreter”). VRI can become blurry or freeze, and result in miscommunication, so in-person is usually preferred by Deaf people
- ASL is not visual English. ASL is a different language. A Deaf person’s comprehension of written English may be limited

## Set up the Visit



- Get a qualified ASL interpreter based on patient preference
- Allow for longer appointments to support interpretation
- Schedule the ASL interpreter when the patient appointment is made
- Request an ASL interpreter that knows the signs for the medical terminology relevant to the visit
- If you find success with an interpreter, request them for future visits
- If using VRI, learn how to use it and test the internet connection prior to the visit

## Prioritize the Deaf Patient



- Create an electronic health record note indicating the Deaf patient needs:
  - ASL interpreters
  - A tap on the shoulder in the waiting room, instead of calling their name
- Ensure the Deaf person can adequately see the interpreter
- Look at the Deaf patient, not the interpreter
- Ensure you have the Deaf patient’s attention before talking
- Avoid covering your mouth with hands, paper or non-clear mask
- Pause between concepts to allow for processing
- Use teach-back techniques
- Ask if the pace is okay

## Work w/the ASL Interpreter



- Briefly orient the ASL interpreter to the purpose and agenda for the visit
- The Deaf patient and ASL interpreter may need a “warm up” discussion so the interpreter can learn the patient’s signs and health literacy level. This discussion can happen in the waiting room
- The ASL interpreter facilitates both language and cultural understanding. If hands are up, the interpreter and Deaf patient are communicating. Wait for hands to come down before adding more information
- Talk directly to the patient. Don’t say to the interpreter, “tell the patient....”