



PROCEDURE

Title: Sign Language Interpreter Request/Cancellation Procedures for WesternU Students and Patients who are D/deaf or Hard-of-Hearing

Effective Date: 11/15/2023

Statement: Western University of Health Sciences' (WesternU) Harris Family Center for Disability and Health Policy (^{HF}CDHP) will facilitate the provision of a qualified sign language interpreter for students(s) that are D/deaf or hard-of-hearing when approved as an accommodation by ^{HF}CDHP and for patients of WesternU's Patient Care Center who are D/deaf or hard-of-hearing and require a sign language interpreter for communication.

Purpose: To ensure students with disabilities receive an equal opportunity to participate in and benefit from courses, programs, services, or activities offered through the college and so that patients can communicate with their healthcare provider(s) so that they receive the quality care they are entitled to under federal and state law.

Procedure Steps: Students Requesting/Cancelling Sign Language Interpreters

	Action	Responsible for Implementing
1	Once ^{HF} CDHP's Associate Director or Director approves a student for sign language interpreting as an accommodation, the designated ^{HF} CDHP staff member will contact the appropriate College to obtain the student's class and rotation schedule for reference.	^{HF} CDHP Staff
2	It is the student's responsibility to complete ^{HF} CDHP's Sign Language Interpreter Request Form and submit it to disabilityaccommodations@westernu.edu a minimum of seven business days prior to the request date for sign language interpreters. ^{HF} CDHP staff will not schedule sign language interpreters until the completed form is received.	Student
3	Based on the Sign Language Interpreter Request Form, the designated ^{HF} CDHP staff member will contact ^{HF} CDHP's contracted sign language vendor to schedule interpreters for the student.	^{HF} CDHP Staff
4	Weekly, the designated ^{HF} CDHP staff member will add the names of the interpreters assigned to each requested class/activity on the form and will email it to the student two (2) days prior to the commencement of the scheduled assignment.	^{HF} CDHP Staff
5	It is the student's responsibility to notify ^{HF} CDHP at disabilityaccommodations@westernu.edu regarding	Student

	changes to their class schedule including the addition or cancellation of classes/activities at least three (3) business days before the scheduled assignment or as soon as it is known so that the sign language interpreters can be notified of the changes. Changes can be made by emailing ^{HF} CDHP at disabilityaccommodations@westernu.edu .	
6	^{HF} CDHP staff will contact the contracted sign language vendor to add/adjust/cancel the sign language interpreter assignment.	^{HF} CDHP Staff
7	The designated ^{HF} CDHP staff member will email the student to confirm the schedule addition/adjustment/cancellation.	^{HF} CDHP Staff/Student
8	Services may be suspended if two (2) or more classes/rotation days are missed without prior notification. The student will need to meet with the Director of ^{HF} CDHP or their designee before services are reinstated.	^{HF} CDHP Staff/Student
9	All communication regarding requests for services, late notifications, extensions on requests, or cancellations, etc. need to be made between the student and ^{HF} CDHP. Students are not to communicate with interpreters directly regarding scheduling issues or make any personal scheduling arrangements with the interpreters.	Student/ ^{HF} CDHP Staff
10	Interpreters will leave after twenty (20) minutes if the student does not attend class/lab/clinical rotation unless they have notified ^{HF} CDHP one (1) business day prior that they will be late and need the interpreter(s) to stay.	Student/ ^{HF} CDHP Staff
11	It is the student's responsibility to notify ^{HF} CDHP about any questions or concerns at disabilityaccommodations@westernu.edu .	Student

Procedure Steps: WesternU Health Patient Care Center Requesting/Cancelling Sign Language Interpreters for Patients

	Action	Responsible for Implementing
1	When a patient requests a sign language interpreter for a scheduled appointment, the designated Patient Care Center (PCC) staff member will contact the patient's health insurance to determine if they will provide an interpreter or reimburse the interpreter cost/rate.	Patient Care Center Staff
2	If the patient's health insurance does not provide a sign language interpreter, but will pay either full or a negotiated rate, the designated department staff member will	Patient Care Center Staff

	complete the Patient Sign Language Request form and fax it to ^{HF} CDHP within five (5) days of the scheduled appointment. The designated staff member will email the Associate Director of ^{HF} CDHP that the document has been faxed. The designated staff member will also provide information regarding the collection of said payment and either provide a check for repayment or a cash transfer for the cost by the date of the appointment.	
3	The Associate Director of ^{HF} CDHP will email the designated PCC staff member to confirm receipt of the payment. The designated ^{HF} CDHP staff member will contact WesternU's contracted sign language vendor to schedule an interpreter(s) for the patient.	^{HF} CDHP Staff
4	^{HF} CDHP's designated staff member will email the PCC staff member who requested the assignment confirmation of the assigned interpreter within two (2) days of scheduled appointment.	^{HF} CDHP Staff
5	If a sign language request needs to be modified or cancelled, the PCC's designated staff member is required to notify ^{HF} CDHP in writing at least three (3) days before the scheduled patient appointment. ^{HF} CDHP staff will email the PCC's designated staff member to confirm receipt to cancel/modify the sign language appointment request.	PCC Staff/ ^{HF} CDHP Staff
6	^{HF} CDHP's designated staff member will call or email the vendor regarding the cancelled/modified sign language interpreter request and communicate their response to the PCC's designated staff member by email.	^{HF} CDHP Staff/PCC Staff
7	If the PCC's designated staff member fails to notify ^{HF} CDHP in writing at least three (3) days before the scheduled patient appointment of the need to cancel/modify the sign language interpreter request; the PCC will be held financially responsible for charges incurred for a late cancellation.	PCC Staff

Definitions/Acronyms:

Deaf/deaf – Deaf with a capital “D” is used to describe individuals who identify as culturally Deaf and are actively engaged with the Deaf Community. Deaf with a lower-case “d” refers to individuals who view hearing loss as a physical condition.

Hard of Hearing – Is a widely accepted term to describe individuals who have hearing loss.

Sign Language Interpreter - Someone who interprets in sign language effectively, accurately and impartially, both receptively and expressively, using any necessary specialized vocabulary.

ACA - Affordable Care Act of 2010

ADA – Americans with Disabilities Act of 1990

ASL – American Sign Language

^{HF}CDHP – Harris Family Center for Disability and Health Policy

WesternU-Western University of Health Sciences

PCC-WesternU Health Patient Care Center

Regulatory Information: Section 504 of the Rehabilitation Act of 1973, (Section 504), 29 U.S.C. §794, Americans with Disabilities Act (ADA), 42 U.S.C. §12101, et. seq., ADA Amendments Act of 2008, California and Oregon state law, Affordable Care Act (ACA) of 2010, Section 1557, California Health and Safety Code § 1259, and WesternU Policies.

Related Policy: Academic Accommodation Provisions

Related Links: [Communication Accommodations](#)

Related Forms: Sign Language Interpreter Request Form, Patient Sign Language Interpreter Request form

Responsible Department: Harris Family Center for Disability and Health Policy (^{HF}CDHP)

Contact: Director of ^{HF}CDHP

Email: disabilityaccommodations@westernu.edu

Policy reviewed by: (check all that apply)

	Academic Senate		General Counsel		Provost's Office
	Biosafety Committee		Human Resources		Radiation Safety Committee
	Board of Trustees		IACUC		VP Research & Biotechnology
	Chief Financial Officer		Information Technology		Sponsored Programs
X	Clinic Administration		Institutional Review Board	X	University Risk Management
	Dean's Council		Operations Council		University Compliance Office
	Directors of Operations		President's Office		University Policy Office
	Environmental Health & Safety		Procurement	X	University Student Affairs