Improving Health Communication for LEP Patients: The Health Care Language Services Implementation Guide

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Census Bureau Statistics on Languages*

- As of 2000, 18% of the total U.S. population aged 5 and over (47 million people) spoke a language other than English at home, compared to:
 - 1990—14% or 31.8 million people
 - 1980—11% or 23.1 million people
- 4.4 million households, containing 11.9 million
 - people, are linguistically isolated
 - No person in the household aged 14 or over speaks English at least "very well"
 - Linguistically isolated people may not be able to communicate with public officials, medical personnel, and other service providers

*Source: Census 2000 Brief

Language Access Services (LAS)

- LAS are services designed to ensure effective communication between individuals with limited English proficiency (LEP) and English speakers. Primary LAS include interpretation (oral) and translation (written) services
- LAS can also involve provisions that enhance communication, such as signage and symbols for wayfinding

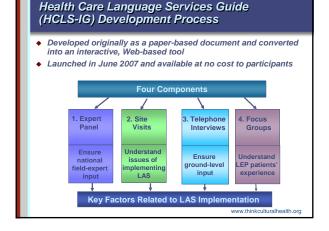
"But how can a doctor cure you if [he] does not know what you have?"

---LEP Patient

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Benefits of LAS

- Improved access to health care: the use of clinical and preventive services has increased when LAS was provided
- Increased access to care: language barriers may affect patient-provider communication
- <u>Higher rates of patient satisfaction</u>: LEP patients have reported higher rates of satisfaction when professional interpreters are provided
- <u>Operational efficiency</u>: employing bilingual providers and professional interpreters can ensure appropriate resource utilization
- <u>Compliance with regulations</u>: including state, local, and accrediting organization regulations



Target Audiences

- Health care organizations at different levels of LAS
 implementation
- Health care organizations from a variety of clinical settings:
 - Community health centers
 - Clinics
 - Hospitals
 - Physicians' practices
 - Mental health institutions
 - Dental offices
 - Long-term care facilities
 - Substance abuse treatment centers
- Health care organizations of all sizes
- Wide range of providers and staff members

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HCLS-IG Design

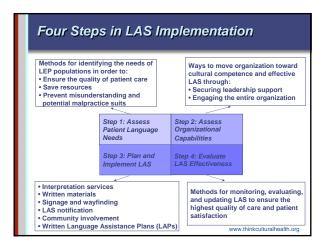
- Focuses on the diverse needs of health care providers
- Includes tools to help providers plan, implement, and evaluate LAS
- Offers contextual learning in the form of case studies
- Interactive mediaenhanced content presentation
- Links to supporting resources



Case Studies

- Encourage critical analysis of current health care practices
- Present a broad sample of patients that are culturally and linguistically diverse
- Illustrate the benefits of implementing LAS for both providers and patients
- Discuss potential problems when LAS are not available
- Stimulate learning using interactive players that combine audio, images, and text





Step One: Assess Patient Language Needs -Collecting Patient Data and Assuring Patient Privacy

- Internal organization-specific data
 - Patient demographics and visits Services provided by your organization
 - Services provided by your organizati
 Community outreach data
- External data
 - National, state, county, and local data
 - Research data
- Data collection must follow privacy and confidentiality guidelines, such as HIPAA, and adhere to racial and ethnic categories specified by U.S. Office of Management and Budget

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Step One: Assess Patient Language Needs -Four Factors to Consider

- Number of LEP patients your organization serves or could serve
- Frequency of the contact that LEP patients have with your organization
- Nature and importance of services provided by your organization
- Resources available to the program and the costs



Step Two: Assess Organizational Capabilities -Create a Business Case

- Demonstrate potential reduction in health care costs and increase in patient safety
- Highlight Federal recommendations and accreditation standards for language services
- Demonstrate staff satisfaction with language services
- Demonstrate patient satisfaction
- Provide potential ideas on how to fund services



Step Two: Assess Organizational Capabilities -Promote Staff Diversity and LAS Training

• Diverse staff:

- Can be a resource for providing culturally and linguistically appropriate care
- Can make culturally and linguistically diverse patients feel more comfortable
 Hiring bilingual full-time staff can provide long-term cost
- savings over staff interpreters
- Topics for staff training on LAS delivery:
 - Organizational policies and procedures for LAS, including Federal requirements
 - Benefits of LAS to providers
 - Access to LAS at your organization
 - Working effectively with interpreters
 - Patient confidentiality



Step Three: Plan and Implement LAS -Working Effectively with Interpreters

- Preparing for the interview
 - · Used trained bilingual/bicultural interpreters
 - Allow extra time for the appointment
 - Provide background information for the interpreter
- During the interview
 - · Face and speak slowly and directly to the patient
 - Use sentence-by-sentence interpretation
 - · Avoid metaphors, slang, and jargon
- Concluding the interview
- Ask the patient to repeat instructions to you
- · Allow time for patients to ask questions for clarification
- Anow time for patients to ask questions for clarificat

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Step Three: Plan and Implement LAS -Translation Services for Written Materials

- <u>Bilingual staff</u>: may not be trained to translate materials
- <u>Web-based resources</u>: include Web sites of medical associations and non-profits
- <u>Clearinghouses</u>: collect information in a specific field that is available to the public
- <u>Community collaborations</u>: other organizations may share the costs of translation or community groups may translate materials
- <u>Translation companies</u>: outside firm hired to translate materials
- <u>Materials for purchase</u>: must be tested and evaluated for the populations your organization serves

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Step Three: Plan and Implement LAS -Language Assistance Plan (LAP)

- Patient needs assessment
 Learn what LAS are needed
 and how to improve existing
 services
- services
 Discover more effective methods for notifying LEP individuals of services
- Organizational capabilities
- assessmentInterpretation services
- Written materials
- developmentSignage and wayfinding
- LAS notification
- Community involvement
- LAS evaluation

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Serves as a starting point for providing LAS

managers, clinicians, staff and new employees

Ensures all LEP patients

are receiving appropriate services

Provides a framework for measuring LAS outcomes

By implementing LAS, you will build a sense of trust between your organization and the local community.

Facilitates training of

Step Four: Evaluate LAS Effectiveness -Conceptualizing LAS and Evaluation

- What do you want to accomplish through the implementation of LAS?
- How will you know whether you have accomplished your goals?
- What activities will you undertake to accomplish your goals?
- What factors might help or hinder your ability to accomplish your goals?
- What will you want to tell others who are interested in your LAS?



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Step Four: Evaluate LAS Effectiveness -Collecting Data for Evaluation

♦ LEP populations

- <u>Written surveys</u>: may be given before appointments, after appointments, or during appointments with the help of an interpreter
- Oral surveys: in person or via phone
- ♦ All patients
 - Patient grievances and incident reports: review incident reports related to language barriers and miscommunication
- Managers, providers, and staff
 - <u>Self-evaluations</u>: during annual reviews or new employee reviews
 - <u>Confidential surveys</u>: may receive more honest responses

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Summary

- LAS are services designed to ensure effective communication between individuals with limited English proficiency (LEP) and English speakers
- Providing LAS to your LEP populations can increase patient satisfaction and compliancy
- "A Patient-Centered Guide to Implementing Language Access Services in Healthcare Organizations" and the "Health Care Language Services Implementation Guide" can assist organizations of all sizes in providing LAS to their LEP populations

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