

 Coast Plaza Hospital Community Hospital of Huntington Park East Los Angeles Doctors Hospital <u>Memorial Hospital of Gardena</u>	Subject: COMMUNICATION: PATIENTS WITH LIMITED ENGLISH PROFICIENCY	Item No. HW-RI
	POLICY AND PROCEDURE	Scope: HOSPITAL WIDE
Reviewed: 4/16, 2/13, 8/10	Approved by: ADMINISTRATION / MEDICAL EXECUTIVE COMMITTEE / GOVERNING BOARD	
Supersedes: 4/13, 10/10		
Effective: 6/16		

PURPOSE:

To identify the process for identifying and communicating with patients with limited English proficiency.

DEFINITIONS:

Limited English Proficiency (LEP): A limited ability or inability to speak, read, write, or understand the English language at a level that permits the person to interact effectively with health care providers.

Interpreting: The oral rendering of one language into a second language and vice versa to facilitate the exchange of communication between two or more persons speaking different languages.

- **Telephone Interpreting:** A form of remote interpreting that offers the delivery of interpreter services through telephone technology.
- **Videoconferencing Interpreting:** A form of remote interpreting that offers the delivery of interpreter services through videoconferencing technology.

Qualified Interpreters and Translators: Qualification for language interpreters and translators may be met through language proficiency assessment, education, training and experience.

Translation: The conversion of a written text into a written text in a second language corresponding to and equivalent in meaning to the text in the first language.

- **Oral Translation:** The verbal reading of a document written in one language into another language.

POLICY:

Memorial Hospital of Gardena will take reasonable steps to ensure that persons with Limited English Proficiency (LEP) have meaningful access and an equal opportunity to participate in our services, activities, programs and other benefits. The policy of MHG is to ensure meaningful communication with LEP patients and their authorized representatives involving their medical conditions and treatment. The policy also provides for communication of information contained in vital documents, including but not limited to, waivers of rights, consent to treatment forms, financial and insurance benefit forms, etc. All interpreters, translators and other aids needed to comply with this policy shall be provided without cost to the person being served, and patients/clients and their families will be informed of the availability of such assistance free of charge. If the patient or legally-authorized representative refuses the use of interpreters, translators, or other aids, this information shall be documented in the patient’s medical record.

Day-to-day conversation or decisions not related to treatment or medications may be interpreted by family members, friends, or staff members. No competency is required for staff members who conduct such transactions.

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Decisions or discussions related to treatment or medications may be interpreted by staff members who have validated competency in medical interpretation. The use of staff members for such discussions shall be documented in the patient's medical record.

Language assistance will be provided through use of qualified bilingual staff, contracts or formal arrangements with local organizations providing interpretation or translation services, or technology and telephonic interpretation services.

MHG will conduct a regular review of the language access needs of our patient population, as well as update and monitor the implementation of this policy and these procedures, as necessary.

PROCEDURES:

1. IDENTIFYING LEP PERSONS AND THEIR LANGUAGE

All patients will be assessed to identify the language and communication needs of the patient with limited-English proficiency. If necessary, staff will use a language identification card (or "*I Speak*") cards or posters to determine the language. In addition, when records are kept of past interactions with patients or family members, the language used to communicate with the LEP person will be included as part of the record.

2. RESOURCES AVAILABLE

The following are resources available to those with limited English:

- For patients with limited English proficiency, a pictorial Communication Card is available to communicate basic, routine needs.
- The **My Accessible Real Time Interpreter (MARTI)** system is a two-way videoconferencing system and is available for communication with patients. MARTI is available in the Emergency Department and in Labor & Delivery. To use the MARTI system, contact the House Supervisor.
- The AT&T Language Line is a form of telephone interpreting available for communicating with patients and is accessible at 1-800-643-2255.

Use of Family Member or Friends as Interpreter

Some LEP persons may prefer or request to use a family member or friend as an interpreter. However, family members or friends of the LEP person will not be used as interpreters unless specifically requested by that individual and **after** the LEP person has understood that an offer of an interpreter at no charge to the person has been made by the facility. Such an offer and the response will be documented in the person's file. If the LEP person chooses to use a family member or friend as an interpreter, issues of competency of interpretation, confidentiality, privacy, and conflict of interest will be considered. If the family member or friend is not competent or appropriate for any of these reasons, competent interpreter services will be provided to the LEP person.

Children and other patients will **not** be used to interpret, in order to ensure confidentiality of information and accurate communication.

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3. PROVIDING WRITTEN TRANSLATIONS

Memorial Hospital of Gardena will provide translation of other written materials, if needed, as well as written notice of the availability of translation, free of charge, for individuals with limited-English proficiency.

4. PROVIDING NOTICE TO LEP PERSONS

MHG will inform LEP persons of the availability of language assistance, free of charge, by providing written notice in languages LEP persons will understand. This information is provided in the *Patient's Handbook*, and notices and signs are posted and provided in intake areas and other points of entry, including but not limited to the emergency room, outpatient areas, etc.

MHG will post its language assistance policy and a notice of availability of language assistance services publically available on its internet website, as required by the CDPH, Assembly Bill (AB) 389.

5. MONITORING LANGUAGE NEEDS AND IMPLEMENTATION

On an ongoing basis, MHG will assess changes in demographics, types of services or other needs that may require reevaluation of this policy and its procedures. In addition, MHG will regularly assess the efficacy of these procedures, including but not limited to mechanisms for securing interpreter services, equipment used for the delivery of language assistance, complaints filed by LEP persons, feedback from patients, etc.

6. DOCUMENTATION OF TRANSLATION

Instances of translation must be documented in the patient's medical record to include translator's name or translation number as provided by the vendor used for the translation.

7. TIPS FOR WORKING WITH TELEPHONE INTERPRETERS

AT THE START OF THE CALL:

Record the interpreter's ID number, introduce yourself and the interpreter, and define the role of the interpreter in the conversation. Be sure to let all parties know that they may be asked to stop, rephrase, or clarify throughout the call.

- Talk directly to the LEP individual**, not the interpreter, For example, "What is your name?" and not "Please ask the caller for their name."
- If the LEP individual is willing to share, **obtain the caller's phone number** in case of accidental disconnection.
- Pause after one or two sentences** to allow for interpretation.
- Ask one question at a time.**
- Speak clearly** at a normal pace and refrain from technical language.

If you think something is wrong with the interpretation, feel free to ask the LEP individual:

"Would you mind repeating back to me what I said, so that I can make sure I am communicating clearly?"

If you believe that your communication with the LEP individual has been compromised by the quality of interpretation, **END THE CALL.**

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Call the telephone interpretation service to obtain a new interpreter. Once you have successfully completed your call with a new interpreter, please provide feedback as noted.

Say “**END OF CALL**” to the interpreter when the call is completed.

REFERENCE:

www.lep.gov, 2016, Retrieved May 2016

<http://www.cdph.ca.gov/certlic/facilities/Documents/LNC-AFL-12-16.pdf>, May 11, 2012, Retrieved May 2016.

<http://www.cdph.ca.gov/certlic/facilities/Documents/LNC-AFL-15-27.pdf>, December 15, 2015, Retrieved May 2016.



KAREN L. SMITH, MD, MPH
Director and State Public Health Officer

State of California—Health and Human Services Agency
California Department of Public Health



EDMUND G. BROWN JR.
Governor

December 15, 2015

AFL 15-27

TO: General Acute Care Hospitals
SUBJECT: Assembly Bill (AB) 389 – Hospital language assistance services
AUTHORITY: Health and Safety Code section 1259

All Facilities Letter (AFL) Summary

- This AFL notifies general acute care hospitals (GACHs) of the chaptering of AB 389, which requires each GACH to make its language assistance services policy available on its internet website.

AB 389 (Chapter 327, Statutes of 2015) requires each GACH to make its language assistance policy and a notice of availability of language assistance services publically available on its internet website by July 1, 2016. Each hospital must publish the notice in English and up to five other of the most commonly spoken languages within the hospital's service area.

Additionally, each GACH must submit the policy to its respective California Department of Public (CDPH) district office no later than July 1, 2016, and CDPH will make the policy publically available on its internet website.

The information in this AFL is a brief summary of the provisions of AB 389. Facilities are responsible for following all applicable laws. CDPH's failure to expressly notify facilities of statutory or regulatory requirements does not relieve facilities of their responsibility for following all laws and regulations. Facilities should refer to the full text of all applicable sections of the Health and Safety Code.

If you have any questions regarding this AFL, please contact your respective district office.

Sincerely,

Original signed by Jean Iacino

Jean Iacino
Deputy Director

