



# POLICY

<b>Category:</b> Patient Rights	<b>Effective Date:</b> See footer
<b>Owner:</b> Director, Risk Management Services	
<b>Title:</b> Communication With Persons With Limited English Proficiency	

**PURPOSE:** The purpose of this policy is twofold. First is to ensure that all 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 or social service agencies) patients and surrogate decision-makers are able to understand their medical conditions and treatment options. Second is for Hoag to provide quality patient care to their LEP patients.

Hoag will take reasonable steps to ensure that persons with LEP have meaningful access and an equal opportunity to participate in our services, activities, programs and other benefits. The policy of Hoag is to ensure meaningful communication with LEP patients/surrogate decision-makers 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, and financial and insurance benefit forms. All interpreters, translators and other aids needed to comply with this policy shall be provided without cost to the person being served, and patients/surrogate decision-makers will be informed of the availability of such assistance free of charge.

Language assistance will be provided through the use of qualified interpreters. This includes external interpreters provided via arrangements with local organizations that provide interpretation or translation services or technology and telephonic interpretation services and internal interpreters which are Hoag employees who have completed a Spanish language certification program through Southern California School of Interpreting. All staff will be provided notice of this policy and procedure, and staff that may have direct contact with LEP individuals will be trained in effective communication techniques, including the effective use of an interpreter.

Hoag 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.

**SCOPE:** All Hospitals and Facilities

**AUTHORIZED PERSONNEL:** All Hoag Organization employees, healthcare providers (including physicians and allied health professionals) and volunteers.

Description
<p><b>1.0 IDENTIFYING LEP PERSONS AND THEIR LANGUAGE</b></p> <p>1.1 Hoag will promptly identify the language and communication needs of the LEP person. If necessary, staff will use a language identification card. In addition, when records are kept of past interactions with patients or surrogate decision-makers, the language used to communicate with the LEP person will be included as part of the record.</p> <p><b>2.0 OBTAINING A QUALIFIED INTERPRETER</b></p> <p>2.1 Any hospital employee or physician may dial *8222 to obtain the outside interpreter service provider. The provider will need the following information: the customer code is "HOAG," the language needed, the employee's name requesting the interpreter, the facility (HHI or HH-NB), the department's cost center and the patient's medical record number.</p> <p>2.2 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</p>



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<p>the person has been made by Hoag. Such an offer and the response will be documented in the patient's record. 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.</p> <p>2.3 The use of minors as interpreters will be avoided unless in emergent or urgent circumstances or where the communication is limited to simple, straightforward matters such as scheduling an appointment or confirming a patient's address and telephone number. Other patients will not be used to interpret, in order to ensure confidentiality of information and accurate communication.</p> <p><b>3.0 PROVIDING WRITTEN TRANSLATION</b></p> <p>3.1 When translation of vital documents is needed, each unit in Hoag will submit documents for translation into frequently-encountered languages to the Corporate Communications Department. Original documents being submitted for translation will be in final, approved form with updated and accurate legal and medical information.</p> <p>3.2 Hoag will provide translation of other written materials, if needed, as well as written notice of the availability of translation, free of charge, for LEP individuals.</p> <p>3.3 Hoag will set benchmarks for translation of vital documents into additional languages over time.</p> <p><b>4.0 PROVIDING NOTICE TO LEP PERSONS</b></p> <p>4.1 Hoag will inform LEP persons of the availability of language assistance, free of charge, by providing written notice in languages LEP persons will understand. At a minimum, signs will be posted and provided in intake areas and other points of entry, including but not limited to the emergency department, the lobby and outpatient areas.</p> <p><b>5.0 MONITORING LANGUAGE NEEDS AND IMPLEMENTATION</b></p> <p>5.1 On an ongoing basis, Hoag will assess changes in demographics, types of services or other needs that may require reevaluation of this policy and its procedures. In addition, Hoag 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, and feedback from patients and community organizations.</p>
<p><b>Reference:</b> <a href="http://www.hhs.gov/ocr/civilrights/resources/providers/medicare_providers/examplesofapolicyandprocedureforlep.html">http://www.hhs.gov/ocr/civilrights/resources/providers/medicare_providers/examplesofapolicyandprocedureforlep.html</a></p> <p><b>Review and/or input for this procedure was given by the following:</b> Risk Management, Corporate Communications, Patient Safety and Regulatory Compliance</p> <p><b>Revision Designation:</b> C - Minor revisions to Policy or Procedure</p>

Controlled Document Approvals :

6/27/2016 11:49 AM	Bynum, Lisa	DIRECTOR RISK MGMT SERVICES	100-8625
6/27/2016 3:12 PM	Lang, Marilyn	PRINCIPAL PATIENT SAFTY CMLPNC	100-8750
6/27/2016 11:45 AM	Guarni, Andrew	VP SR AND CFO	100-8610