

Language Access Committee

Greater Cincinnati Regional Language Access Plan

February 2018

FOREWORD

The Health Collaborative (THC) is a Cincinnati-based nonprofit leading data-driven improvement initiatives that result in healthier people, better care, and lower costs. Serving Greater Cincinnati, Northern Kentucky, and Southeast Indiana, THC works with those who provide care, pay for care, and receive care, to find mutual solutions to healthcare's most challenging problems. We are a neutral forum for all community stakeholders invested in health and healthcare improvement, providing a robust set of membership benefits to our members and partners – a multi-stakeholder group of regional organizations comprised of health systems, hospitals, post-acute and non-acute care providers, and regional businesses. We provide fee for service value including consulting, education, convening, technology solutions and clinical messaging for customers within and outside of our region.

The Language Access Committee

Mission: To lead data-driven improvement in language access that results in healthier people, better care, and lower costs.

Background: The committee originated to support standardization in GPO language services contracts and evolved to also assist area hospitals and health care facilities in the Greater Cincinnati area in developing best practices to meet language access needs of the community by sharing programs, information, and insight. Its purpose is to help organizations to recognize and respect a patient's right to effective communication in any healthcare setting. The Language Access Committee (LAC) facilitates members' participation in identifying healthcare organizations' wide communication issues, promotes open dialogue between members, reinforces our commitment to patients' rights to receive information in a manner he or she understands, and improves communication, understanding, and compliance. This is accomplished by sharing programs, information, and insights to develop best practices for language access for the Greater Cincinnati Region. It promotes communication that respects the patient's rights to be informed about his or her care by providing information in a manner tailored to the patient's age, language, and ability to understand. Committee members include managers and administrators of languages access services, hospital interpreters, and other personnel at Health Collaborative member organizations who have responsibility in their facility for patient communication and language access.

Concerning the Greater Cincinnati Regional Language Access Plan

Who:

The Language Access Committee of The Health Collaborative has created a Regional Language Access Plan template for use by all of The Health Collaborative's members as well as the broader regional community.

What:

The purpose of the Greater Cincinnati Regional Language Access Plan is to ensure there is a regional approach to providing meaningful access to our patients and families with limited English proficiency (LEP) to healthcare services in the Greater Cincinnati region, fulfilling the patient's rights to effective communication. Each organization using this template is encouraged to develop policies, procedures, and identify responsible parties for the elements within this Language Access Plan. The Health and Human Services Language Access Plan, published in 2013, served as the foundation and inspiration for this plan.

Why:

This Language Access Plan will align with CMS, Joint Commission, and Section 1557 in serving the Greater Cincinnati LEP population and serve as a reference for members of The Health Collaborative. This document is not intended to have wholesale adoption, but is provided to you as a tool to help you create your organization's own Language Access Plan. It is important to consider your individual situation and to tailor the plan to best meet the needs of your constituency and your internal operations.

How: Implementation of a Language Access Plan in your organization

You may use the template provided below as a guideline to develop a plan appropriate to your organization. The Language Access Committee of The Health Collaborative recommends development of a plan by examining each element and aligning the plan with written policies and Standard Operating Procedure to identify operational practices, responsibilities, and locations of services. See the Language Access Plan References for additional references and resources.

Additional Inquiries should be directed to the Language Access Committee of The Health Collaborative by email to: membership@healthcollab.org

The Health Collaborative Language Access Committee

Greater Cincinnati Regional Language Access Plan

February 2018

MISSION:

To lead data-driven improvement in language access that results in healthier people, better care, and lower costs.

GOAL:

The organization will provide access to timely, quality language assistance services to individuals with limited English proficiency (LEP), or who are Deaf or Hard of Hearing.

ELEMENTS:

Element 1: Assessment: Needs and Capacity

The organization will have in place processes to regularly identify and assess the language assistance needs of current and potential customers, as well as the processes to assess the organization's capacity to meet those needs.

- Identify an office or position responsible for conducting annual assessments
- Regularly consult experts, advocacy organizations, individuals with LEP or who are Deaf/HOH, subject matter experts and applicable research to determine effective practices for assessing and implementing language assistance needs of current and projected customers
- Use data resources such as the US Census (American community survey) to evaluate the extent of need for assistance in particular languages in the city, state and region
- Collect data at point of initial registration and identify individuals' preferred language and need for interpreter
- Collect and review organizational usage data related to language, locations
- Identify gaps in language assistance ability and take specific steps to enhance language services

Element 2: Oral Language/Interpreter Assistance Services

The organization will provide oral language assistance/qualified interpreters, in both face to face and telephone encounters, as well as video encounters in some locations, to meet the needs of all patients identified as LEP, Deaf or Hard of Hearing.

- Identify an office or position responsible for developing and managing a program that ensures individuals with LEP or who are Deaf/HOH who are participating in organizational programs are provided language assistance services in accordance with plan.
- Maintain contracts with language service agencies who demonstrate the ability to provide competent interpreter services in languages other than English or in American Sign Language.

- Maintain a process for all staff to identify individuals' language and interpreter needs and how to contact agencies and other resources for assistance. Identify internal resources for assistance.
- Provide notification to all customers that language assistance services are free of charge.
- If an organization employee requests the ability to use a language other than English to treat a patient or to interpret for a patient, provide assessment of language and interpreting ability of the employee through a qualified agency that meets contract requirements.

Element 3: Written Translations

The organization will identify, translate and make accessible in various formats, documents in languages other than English in accordance with assessments of need and capacity conducted under Element 1.

- Identify individuals responsible for timely and accurate translation of written documents
- Maintain contracts with agencies to provide qualified translations.
- Identify documents to be translated and made available at all times, such as Patient's Rights publications and Informed consent forms. Other documents will be translated on request.
- Identify the process for staff to request translation of new documents
- Identify the process for staff to obtain copies of already translated documents

Element 4: Policies and Procedures

The organization will develop, implement and regularly update written policies and procedures that ensure individuals with LEP or who are Deaf or HOH will have meaningful access to network services.

- Identify an office or position responsible for development and implementation of policies and ensuring that each element of the language Access Plan is implemented in the organization's programs and activities
- Regularly monitor the efficacy of services provided
- Maintain policies and procedures for receiving and addressing language assistance concerns or complaints and establish policies and procedures to improve services

Element 5: Notification of the Availability of Language Assistance at No Cost

The organization, in plain language, will proactively inform individuals with LEP or who are Deaf or HOH, that language assistance is available at no cost.

- Multilingual posters or signs will be placed at identified points of entry and registration
- Statements will be placed in informational materials, the organization's webpage and other materials as identified
- The result from the element 1 assessment will be used to identify languages for taglines in notifications
- Distribute and make available resources directly and over the Internet to all current providers, contractors and vendors. Provide technical assistance necessary to make recipients aware that language assistance services are provided in order to comply with Title VI of the Civil Rights Act of 1964 and must be provided at no cost to those in need of language services
- See HHS plan for webpage, other notification

Element 6: Staff Training

The organization will commit resources and provide employee training as necessary to ensure management and staff understand and can implement the policies and procedures of the Language Access Plan.

- Designate an office or position responsible for developing, implementing and committing resources necessary to train employees to implement this plan.
- Develop, make available and disseminate training materials that will assist management and staff in procuring and providing effective communication for individuals with LEP or who are Deaf/HOH
- Train management and staff on policies and procedures of the language services program, and in the use of resources available to provide language assistance in a timely manner
- Train appropriate staff on when and how to access and utilize oral and written language assistance services, how to work with interpreters and translators, how to convey complex information using plain language, and how to communicate effectively and respectfully with individuals with LEP.

Element 7: Assessment: Access and Quality

The organization will regularly assess the accessibility and quality of language assistance activities for individuals with LEP or who are Deaf HOH, maintain an accurate record of language Assistance services, and implement or improve LEP programs and activities in accordance with customer need and organizational capacity.

- Designate an office or position responsible for developing and maintaining an accurate record of a program that regularly assesses and takes necessary steps to improve and ensure the quality and accuracy of language assistance services provided to individuals with LEP.
- Review and address complaints received from individuals with LEP with respect to language assistance services in a timely manner.
- Identify best practices for continuous quality improvement regarding language assistance activities
- Implement methods for measuring improvements in language access and take steps to ensure that information is collected in a manner that increases comparability, accuracy and consistency across programs.
- Identify and disseminate data to the appropriate quality management program

Element 8: Stakeholder Consultation

The organization will consult with stakeholder communities to identify language assistance needs of individuals with LEP, implement appropriate language access strategies to assure individuals with LEP have meaningful access in accordance with assessments of customer need and agency capacity.

- Designate an office or position responsible for identifying opportunities to include stakeholders in the development of policies and practices that enhance access to network programs and activities. Consult stakeholder communities to assess the accessibility, accuracy, cultural appropriateness and overall quality of language assistance services.

Element 9: Digital Information

The organization will develop and implement specific written policies and procedures to ensure that, in accordance with assessments of LEP needs and organization capacity, digital information is accessible by communities in need of language services.

- Designate and office or position responsible for developing and implementing a network strategy for making its publicly available online information accessible to individuals with LEP in accordance with assessments of need and capacity
- Prominently display links on the organization's English Language Website to documents that are also available for viewing or downloading in languages other than English

References:

This working document was inspired and based on the [Health and Human Services Language Access Plan](#), created in 2013, and taking particular consideration to Section 1557, the nondiscrimination provision of the Affordable Care Act (ACA), which has been in effect since its enactment in 2010.

Background:

[Federal law](#) requires healthcare providers to document the language skills of anyone who communicates directly with patients, families or other non-employees in a language other than English.

The following are excerpts from Governmental and Accrediting Bodies that mandate healthcare providers must take reasonable steps in meeting an individual communication needs.

Section 1557 of the Affordable Care Act (Content provided by the U.S. Department of Health and Human Services, Office for Civil Rights - July 2016) <https://www.hhs.gov/civil-rights/for-individuals/section-1557/index.html>

- A covered entity must take reasonable steps to provide meaningful access to each individual with LEP eligible to be served or likely to be encountered in its health programs and activities. Reasonable steps may include the provision of language assistance services, such as oral language assistance or written translations.
- A covered entity must publish taglines, which are short statements in non-English languages, in significant publications and post in prominent locations and on its website, to notify the individual about the availability of language assistance services.
- A covered entity must offer a qualified interpreter when oral interpretation is a reasonable step to provide an individual with meaningful access.
- Where language services are required, they must be provided free of charge and in a timely manner.

A covered entity must adhere to certain quality standards in delivering language assistance services. For instance, a covered entity may not:

- Require an individual to provide his or her own interpreter.
- Rely on a minor child to interpret, except in a life-threatening emergency where there is no qualified interpreter immediately available.
- Rely on interpreters that the individual prefers when there is competency, confidentiality or other concerns.
- Rely on unqualified bilingual or multilingual staff.
- Use low-quality video remote interpreting services.

National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care <https://www.thinkculturalhealth.hhs.gov/pdfs/enhancednationalclasstandards.pdf>

- CLAS 05: Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.
- CLAS 06: Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
- CLAS 07: Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
- CLAS 08: Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

Joint Commission Standards and Elements of Performance for CLAS Standards

[https://www.jointcommission.org/assets/1/6/Crosswalk- CLAS -20140718.pdf](https://www.jointcommission.org/assets/1/6/Crosswalk-CLAS-20140718.pdf)

- TS.0101.01: The hospital effectively communicates with patients when providing care, treatment, and services.
- PC.02.03.01 The hospital provides patient education and training based on each patient's needs and abilities.
- RC.02.01.01 The medical record contains information that reflects the patient's care, treatment, and services.
- RI.01.01.01 The hospital respects, protects, and promotes patient rights.
- RI.01.01.03 The hospital respects the patient's right to receive information in a manner he or she understands.
- PC.02.01.21 The hospital effectively communicates with patients when providing care, treatment, and services.
- RI.01.01.01 The hospital respects, protects, and promotes patient rights.
- RI.01.01.03 The hospital respects the patient's right to receive information in a manner he or she understands.
- HR.01.02.01 The hospital defines staff qualifications.
- HR.01.02.05 The hospital verifies staff qualifications.
- HR.01.02.07 The hospital determines how staff function within the organization.
- HR.01.04.01 The hospital provides orientation to staff.
- HR.01.05.03 Staff participate in ongoing education and training.
- HR.01.06.01 Staff are competent to perform their responsibilities.
- HR.01.07.01 The hospital evaluates staff performance.
- PC.02.01.21 The hospital effectively communicates with patients when providing care, treatment, and services.
- PC.02.03.01 The hospital provides patient education and training based on each patient's needs and abilities.
- PC.04.01.05 Before the hospital discharges or transfers a patient, it informs and educates the patient about his or her follow-up care, treatment, and services.
- RI.01.01.03 The hospital respects the patient's right to receive information in a manner he or she understands.

Disclaimer:

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This document was finalized by the Language Access Committee in February 2018. The intention is to revisit the Language Access Plan on annual basis and modify, as necessary.

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