



Ensure Compliance with the Joint Commission's New Standards for Patient-Centered Communication

10 Question Checklist



New Standards Checklist

Does your Hospital Comply with the Joint Commission's New Standards for Patient-Centered Communication?

The Joint Commission, an accreditation organization which sets healthcare performance standards, released recommendations to comply with new standards for patient-centered communication. Hospitals with Joint Commission accreditation, and those seeking accreditation, will be scrutinized regarding their language services programs and processes for working with Limited English Proficient (LEP) patients throughout the provision of care.

The Patient-Centered Communication standards were approved in December 2009 and released to the field in January 2010. The standards have been published in the 2011 "Comprehensive Accreditation Manual for Hospitals (CAMH): The Official Handbook" and are currently being used by surveyors to evaluate Joint Commission compliance.

10 Question Checklist

CyraCom, the leader in language services for healthcare, has created a 10 Question Checklist to gauge your compliance with new standards for the provision of Language Services. The questions are based on relevant text from The Joint Commission's Roadmap for Hospitals*, and each question should be answered with a "yes" to ensure compliance. Detailed information is provided for each question:

- Excerpt /of standard that addresses the question
- Complete standard as it refers to the question (with page number from The Roadmap*)
- Recommendations by the Joint Commission on how to achieve compliance with the standard (with page number from The Roadmap*)

The goal of the Checklist is to provide a fast overview of the new language service standards. For more information, consult the Joint Commission's Roadmap*.

Reference

*The Joint Commission: Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care: A Roadmap for Hospitals. Oakbrook Terrace, IL: The Joint Commission, 2010.

<http://www.jointcommission.org/assets/1/6/ARoadmapforHospitalsfinalversion727.pdf>

Question	Extract from Standard	Standard	Recommendations
<p>1 Do you provide patients language interpretation and translation services?</p>	<p>The hospital provides language interpreting and translation services.</p>	<p>RI.01.01.03 The hospital respects the patient's right to receive information in a manner he or she understands.</p> <p>EP 2 The hospital provides language interpreting and translation services. (See also RI.01.01.01, EPs 2 and 5; PC.02.01.21, EP 2; HR.01.02.01, EP 1)</p> <p>Note: <i>Language interpreting options may include hospital-employed language interpreters, contract interpreting services, or trained bilingual staff.</i></p> <p><i>These options may be provided in person or via telephone or video. The hospital determines which translated documents and languages are needed based on its patient population.</i></p> <p>Pg 62</p>	<p>Develop a system to provide language services.</p> <p>The provision of safe, quality care requires effective patient-provider communication. Hospitals must develop a system to provide language services to address the communication needs of patients whose preferred language is not English, including patients who communicate through sign language.</p> <ul style="list-style-type: none"> Establish a centralized budget to provide language services throughout the hospital. Determine the types of language services the hospital provides or needs to provide, including bilingual care providers, language interpreters, and translators either on staff or provided by an external vendor for contracted language services. Identify the methods used to provide language services (for example, in-person, telephone, or video remote interpreting). Consider the number of frequently encountered languages and languages less commonly encountered when determining the composition of language services. Offer a mixture of language services based on the needs of the patient population so that services are available 24 hours a day, 7 days a week. Provide translated written documents for frequently encountered languages to meet patient communication needs. Determine which documents and languages need to be translated to meet the needs of the patient population. Table 6-5, on page 41, presents a list of vital and nonvital documents hospitals may consider when determining which documents to translate. Consider developing pre-recorded sign language video content for commonly used patient education materials to meet the needs of deaf patients. Incorporate language services information, such as types of services and qualifications for language interpreters and translators, into new or existing hospital policies and procedures. Train staff on how to access language services and effectively work with interpreters.* Inform patients of their right to receive language services. Note the use of language services in the patient's medical record. Monitor the use of language services. <p>Pg 40</p>

2	Have you analyzed demographic data to determine your patient population's language needs?	The hospital determines which... languages are needed based on its patient population.	<p>RI.01.01.03 The hospital respects the patient's right to receive information in a manner he or she understands.</p> <p>EP 2 The hospital provides language interpreting and translation services. (See also RI.01.01.01, EPs 2 and 5; PC.02.01.21, EP 2; HR.01.02.01, EP 1)</p> <p>Note: <i>Language interpreting options may include hospital-employed language interpreters, contract interpreting services, or trained bilingual staff.</i></p> <p><i>These options may be provided in person or via telephone or video. The hospital determines which translated documents and languages are needed based on its patient population.</i></p> <p>Pg 62</p>	<p>Use available population-level demographic data to help determine the needs of the surrounding community.</p> <p>An awareness of the demographic composition of the community allows hospitals to plan for the services necessary to meet patient needs. Hospitals can use population-level data from several available sources to identify and respond to changes in the demographics of the surrounding community.*</p> <ul style="list-style-type: none"> • Use demographic data to determine whether new services or programs should be developed to address the needs of the community. Population-level demographic data on race, ethnicity, language, and disability may be obtained from U.S. Census Bureau figures, local school enrollment profiles, voter registration records, and public health department databases. Data from the previous 3 to 5 years will best represent current needs in the community. • Consider information on national and state literacy and health literacy levels, available from the 2003 National Assessment of Adult Literacy Survey [16], when developing admission or other forms, patient education materials, or discharge instruction.† • Use national- and state-level data on sexual orientation from Web sites such as http://www.census.org and http://www.gaydata.org to develop initiatives that address the health concerns of lesbian, gay, bisexual, or transgender (LGBT) patients. • Consider using indirect data analysis methods such as geocoding (that is, matching addresses to community needs) and surname analysis to plan services and target community-based interventions [3]. • Conduct focus groups or interview community leaders to identify changes in the demographics and needs of the surrounding community. <p>Pg 36</p>
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<p>3</p>	<p>Do you inform your patients of their right to have a language interpreter?</p>	<p>The hospital prohibits discrimination based on... language</p>	<p>RI.01.01.01 The hospital respects, protects, and promotes patient rights.</p> <p>EP 29 The hospital prohibits discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression.</p> <p>Pg 61</p>	<p>Inform patients of their rights.</p> <p>Several patient rights address the unique needs of individuals, such as the right to have a language interpreter, the right to receive accommodation for a disability, the right to be free from discrimination when receiving care, the right to identify a support person to be present during the hospital stay, and the right to designate a surrogate decision-maker. There are several ways to make sure that patients are informed of their rights in a manner that supports their involvement in their care, including the following:</p> <ul style="list-style-type: none"> • Post relevant hospital policies (in the most frequently encountered languages) in the waiting room. • Include information about relevant hospital policies in patient Bill of Rights documents. • Provide patient rights materials in multiple languages and alternative formats (for example, audio, visual, or written materials). • Explain the right to have a language interpreter, the role of the interpreter in the health care encounter, and that it is a free service provided for the safety of the patient. <p>Pg 9</p>
<p>4</p>	<p>During admission do you identify your patients' preferred language for discussing health care?</p>	<p>The hospital identifies the patient's oral and written communication needs, including the patient's preferred language for discussing health care.</p>	<p>PC.02.01.21 The hospital effectively communicates with patients when providing care, treatment, and services.</p> <p>EP 1 The hospital identifies the patient's oral and written communication needs, including the patient's preferred language for discussing health care. (See also RC.02.01.01, EP 1)</p> <p>Pg 58</p>	<p>Identify the patient's preferred language for discussing health care.</p> <p>Ask the patient, "In what language do you prefer to discuss your health care?" The hospital should determine the preferred language of each patient, regardless of whether the patient speaks English fluently or uses another language to communicate.</p> <ul style="list-style-type: none"> • Use a language identification card or tool to determine the patient's preferred language [2]. • Arrange for language services to help identify the patient's preferred language.‡ • Identify the preferred sign language for the patient who uses sign language to communicate (for example, American Sign Language, Signed English, or, for patients who are deaf or hard of hearing and have limited English proficiency, a sign language from another country). • Note the patient's preferred language for health care discussions in the medical record and communicate this information to staff. <p>Pg 10</p>

<p>5</p>	<p>Do your medical records contain the patient's preferred language for discussing health care?</p>	<p>The medical record contains the following demographic information: The patient's communication needs, including preferred language for discussing health care.</p>	<p>RC.02.01.01 The medical record contains information that reflects the patient's care, treatment, and services.</p> <p>EP 1 The medical record contains the following demographic information:</p> <ul style="list-style-type: none"> • The patient's name, address, date of birth, and the name of any legally authorized representative • The patient's sex • The legal status of any patient receiving behavioral health care services • The patient's communication needs, including preferred language for discussing health care (See also PC.02.01.21, EP 1) <p>Pg 60</p>	<p>Develop a system to collect patient language information.</p> <p>The collection of patient language information allows hospitals to identify the language needs of their patient population and provide appropriate language services to meet those needs.</p> <ul style="list-style-type: none"> • Modify paper or electronic medical records to allow for the collection of patient language information. This may involve adding new fill-in spaces, fields, or drop-down menus to the forms to capture language data. Use standardized language categories to collect patient language information (see Table 6-3, page 38). Refer to the Institute of Medicine report Race, Ethnicity, and Language Data: Standardization for Health Care Quality Improvement for guidance on collecting patient language information, recommended categories to use, and helpful resources [17]. • Address the collection of patient-level language information in hospital policies and procedures. • Train staff to collect patient-level language information. Consult the Health Research and Educational Trust Disparities Toolkit for information and resources on training staff to collect patient language data [18]. • Use aggregated patient-level language data to develop or modify services, programs, or initiatives to meet service population needs. <p>Pg 36</p>
<p>6</p>	<p>Does your admission team communicate to the care team information about unique patient needs?</p>	<p>The hospital communicates with the patient during the provision of care, treatment, and services in a manner that meets the patient's oral and written communication needs.</p>	<p>PC.02.01.21 The hospital effectively communicates with patients when providing care, treatment, and services.</p> <p>EP 2 The hospital communicates with the patient during the provision of care, treatment, and services in a manner that meets the patient's oral and written communication needs. (See also RI.01.01.03, EPs 1-3)</p> <p>Pg 58</p>	<p>Communicate information about unique patient needs to the care team.</p> <p>Information on patient needs collected during admission can help staff coordinate communication assistance, plan for cultural or religious or spiritual accommodations, or provide necessary equipment throughout the care continuum.</p> <ul style="list-style-type: none"> • Note all relevant data in the patient's medical record. • Create a process to identify any patients with unique needs (for example, color code the patient's chart, add flags or stickers to the patient's chart, or use patient armbands to denote different patient needs). • Ensure that data collected during admission can be transferred to the clinical database for use at the point of care, especially if multiple data systems are used to capture patient information. <p>Pg 12</p>

7	Do you identify and address patient's language communication needs during all steps of the care process (assessment / treatment / discharge, etc.)?	The hospital communicates with the patient during the provision of care, treatment, and services in a manner that meets the patient's oral and written communication needs.	<p>RC.02.01.01 The medical record contains information that reflects the patient's care, treatment, and services.</p> <p>EP 2 The hospital communicates with the patient during the provision of care, treatment, and services in a manner that meets the patient's oral and written communication needs. (See also RI.01.01.03, EPs 1-3)</p> <p>Pg 60</p>	<p>Identify and address patient communication needs during assessment / treatment / transfer / discharge</p> <ul style="list-style-type: none"> • Provide appropriate communication assistance during the assessment/ treatment / transfer / discharge process to meet the communication needs • Identify and address patient communication needs during assessment and provider. Patient communication needs and supports should be recorded in the patient's medical record, and any documented communication needs should trigger staff to arrange for the appropriate communication assistance. • Check the patient's medical record to determine if any communication needs were previously identified, including the patient's preferred language and any sensory or communication needs. • Arrange for language services during assessment to help patients whose preferred language is not English or who are deaf. • Note the use of communication assistance in the medical record and communicate this need to staff. <p>Pg 13</p>
8	Have you determined all documents that need to be (e.g. informed consent / discharge instructions)?	The hospital determines which translated documents... are needed	<p>RI.01.01.03 The hospital respects the patient's right to receive information in a manner he or she understands.</p> <p>EP 2 The hospital provides language interpreting and translation services. (See also RI.01.01.01, EPs 2 and 5; PC.02.01.21, EP 2; HR.01.02.01, EP 1)</p> <p>Note: <i>Language interpreting options may include hospital-employed language interpreters, contract interpreting services, or trained bilingual staff. These options may be provided in person or via telephone or video. The hospital determines which translated documents and languages are needed based on its patient population.</i></p> <p>Pg 61</p>	<p>Table 6-5. Identifying Vital Documents Appropriate for Translation</p> <p>Vital Documents</p> <ul style="list-style-type: none"> • Informed consent documents • Complaint forms • Information about free language assistance programs or services • Notices of eligibility criteria for, rights in, denial or loss of, or decreases in benefits or services • Intake forms that may have clinical consequences <p>Non-Vital Documents</p> <ul style="list-style-type: none"> • Menus • Third-party documents, forms, or pamphlets distributed as a public service • Large documents such as enrollment handbooks (although vital information contained within these documents may need to be translated) • General information intended for informational purposes only. <p>Source: Adapted from United States Department of Health and Human Services, Office for Civil Rights. Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition against National Origin Discrimination Affecting Limited English Proficient Persons. Washington, DC; 2003. Available at: http://www.hhs.gov/ocr/civilrights/resources/specialtopics/lep/policyguidancedocument.html. (Accessed March 2, 2010.)</p> <p>pg 41</p>

<p>9</p>	<p>Have you determined how to obtain informed consent from your Limited English Proficient patients?</p>	<p>Informed consent is obtained in accordance with the hospital's policy and processes and, except in emergencies, prior to surgery</p>	<p>RI.01.03.01 The hospital honors the patient's right to give or withhold informed consent.</p> <p>EP 13 Informed consent is obtained in accordance with the hospital's policy and processes and, except in emergencies, prior to surgery.</p> <p>Pg 54</p>	<p>Tailor the informed consent process to meet patient needs.</p> <p>The informed consent process allows patients and providers to establish a mutual understanding about the care, treatment, and services the patient will receive.</p> <ul style="list-style-type: none"> • Use translated informed consent materials in the patient's language whenever possible. Provide an interpreter for the patient's preferred language during informed consent discussions, even if the hospital provides translated materials, to facilitate patient communication.† • If translated documents are not available, nterpreters should not attempt a sight translation; instead the clinician should obtain the patient's consent verbally. • Note the receipt of informed consent and any communication assistance used to obtain it in the medical record. <p>Pg 18</p>
<p>10</p>	<p>Do you ensure the competency of individuals providing language services?</p>	<p>The hospital defines staff qualifications specific to their job responsibilities.</p> <p>Note 4: <i>Qualifications for language interpreters and translators may be met through language proficiency assessment, education, training, and experience</i></p>	<p>HR.01.02.01 The hospital defines staff qualifications.</p> <p>EP 1 The hospital defines staff qualifications specific to their job responsibilities.</p> <p>Note 4: <i>Qualifications for language interpreters and translators may be met through language proficiency assessment, education, training, and experience. The use of qualified interpreters and translators is supported by the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, and Title VI of the Civil Rights Act of 1964. (Inclusion of these qualifications will not affect the accreditation decision at this time.)</i></p> <p>Pg 57</p>	<p>Ensure the competency of individuals providing language services.</p> <p>Language services that meet patient communication needs promote quality and safety. Hospitals must ensure the competency of their language interpreters and translators.*</p> <ul style="list-style-type: none"> • Define qualifications for language interpreters and translators to comprise a combination of language proficiency assessment, education, training, and experience. • Consider including certification by the Registry of Interpreters for the Deaf or the National Association of the Deaf as a qualification for sign language interpreters.† • Conduct an assessment of language proficiency in both English and the target language for language interpreters and translators, or contact an external vendor to perform language proficiency assessments for these individuals. • Promote ongoing training and educational opportunities for language interpreters and translators. • Find out the qualifications of the language interpreters and translators provided by an external vendor for contracted language services. • Refrain from relying on untrained individuals, including a patient's family members or friends, to provide language services. • Consult resources from the National Council on Interpreting in Health Care (http://www.ncihc.org) and the American Translators Association (http://www.atanet.org) for additional guidance on the qualifications and competencies to expect of language interpreters and translators.‡ <p>Pg 38</p>

About CyraCom

CyraCom is the leading provider of language solutions for healthcare, including Over-the-Phone Interpretation, Video-Remote Interpretation, On-Site Interpretation, Translation and Localization, and Language Assessment. Our focus on healthcare is an important reason why CyraCom's translation and interpretation solutions are exclusively endorsed by the American Hospital Association. Today, with over 2,000 healthcare clients and a comprehensive portfolio of language services, CyraCom has the expertise to provide dynamic solutions to meet your organization's needs.

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