

## F17: Incorporating National Culturally and Linguistically Appropriate Standards Compliance for Limited English Proficiency Families in Pediatric Primary Care Abstract

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### Abstract

#### Background and Significance

Despite national initiatives to increase healthcare access and equality, limited English proficiency (LEP) in the United States (US) creates barriers to quality and accessible health care. National Standards for Culturally and Linguistically Appropriate Services in Health Care (National CLAS Standards) guide health care equity and equality improvements. This study evaluated interventions relating to language to increase compliance with National CLAS Standards 7 and 8. These standards “Ensure the competence of individuals providing language assistance” and “Provide easy-to-understand print materials in languages used by populations in the service area”.

#### Purpose

A general project aim of improving compliance with National CLAS Standards was set. Specific aims were developed to provide methodology guidance and outcome measurement to address weaknesses in the system, staff and patient experience. *Aim 1* consisted of assessing the self-reported levels of non-English language fluencies of clinical and non-clinical healthcare staff. This aim sought to quantify potential compliance with National CLAS Standard 7. *Aim 2* included providing and piloting easy-to-understand print materials and signage in the languages commonly used by the LEP patient population in the service area of registration and checkout. This aim evaluated new a processes and practice tools guided by National CLAS Standard 8.

#### Details of Innovation

The practice analysis project was set in a pediatric primary care office in the southeastern US. The sample consisted of healthcare staff and limited English proficiency parents/caregivers. Interventions evaluated the presence of bilingual staff and bilingual print materials. Outcomes measured were the identification of staff with non-English language skills and print material feedback.

#### Outcomes

The presence of self-assessed language skills in staff was confirmed, with 47 percent of respondents indicating language skills other than English. Feedback from 18 surveys on bilingual materials was supportive of utility and efficiency.

#### Discussion

Low-cost and simple interventions like surveying language skills and incorporating signage can increase compliance with National CLAS standards.

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*Keywords:* limited English proficiency, National CLAS Standards, health care equity, language, pediatric primary care