

# Key Facts in Rural Health

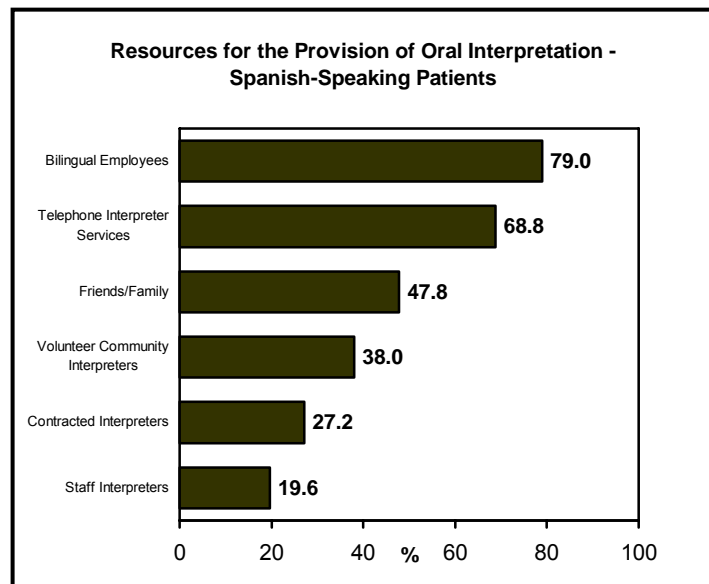
Fall 2005

## Rural Hospitals and Spanish Speaking Patients with Limited English Proficiency

Our study explored how rural hospitals are meeting the needs of LEP patients, reflecting the Federal standards for culturally and linguistically appropriate services (CLAS standards). We identified hospitals in two types of rural counties: those with substantial growth in the Latino population between the 1990 and 2000 Censuses, and counties with large and stable Latino populations. We contacted 319 rural hospitals, most of which had fewer than 100 beds (67.4%) and were located in counties with large, stable Hispanic populations (68.0%). About half (54.5%) were located near metropolitan areas, with potential competition from other larger hospitals.

### Findings:

- Seventy-eight percent of hospitals reported having a written policy related to language assistance and 91.7% reported having tools for patients to communicate their language needs, yet only 40% reported language assistance advertisements in Spanish.
- While almost every hospital (98.7%) reported providing oral interpretation to Spanish-speaking patients, only 19.6% used staff interpreters or those employees whose primary workforce responsibility is interpretation. A large percentage of hospitals (85.6%) reported having documents or materials available in Spanish.
- Hospitals in counties with newly growing Hispanic populations were more likely to report “high” or “very high” demand for Spanish interpretation in the emergency department (ED), outpatient (OP), and inpatient (IP) than those in counties with stable Hispanic populations. Hospitals in high-growth counties were also more likely to report having tools for patients to communicate their language needs and documents or materials in Spanish.
- Rural hospitals adjacent to a metropolitan area were more likely to report “high or very high numbers” of visits by Hispanic patients in need of interpretation services in the ED, OP, and IP and the highest demand for Spanish interpretation was in the ED.
- Lack of state agency resources (65.6%) and the lack of hospital funding for interpretation or translation (65.3%) were most often noted as potential barriers to effective language assistance. Hospitals that voluntarily reported sample or model programs stressed the importance of training interpreters in-house or collaborating with colleges and universities that offer nationally recognized programs.



A full copy of the report can be obtained from the SC Rural Health Research Center at <http://rhr.sph.sc.edu>



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