"Do the Right Thing!"

Assuring Section 1557 Compliance Program in a Federally Qualified Health Center (FQHC)

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HCCA Clinical Practice Compliance Conference

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What is Section 1557?

* **Section 1557 of the Patient Protection & Affordable Care Act (PPACA) prohibits discrimination on the basis of <u>race, color, national origin, sex, age, or disability</u> in health programs or in activities that receive federal financial assistance.**
* **Section 1557 builds upon several long-standing federal civil rights laws, including Title VI of the Civil Rights Act of 1964, which prohibits recipients of federal financial assistance from discriminating on the basis of race, color, or national origin.**
* **Section 1557 also builds on Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990, and the Americans with Disabilities Act Amendments Act of 2008.**

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Do the Requirements of Section 1557 Apply to FQHCs?

* <u>Yes</u>, because FQHCs receive federal funding through Section 330 of the Public Health Service Act, they are obliged to comply with Section 1557.
* <u>Yes</u>, as participants in the Medicare, Medicaid, and Marketplace programs, FQHCs are obliged to comply with Section 1557.
* Section 1557 took effect on July 18, 2016.
* Compliance with Section 1557 is monitored by the US DHHS Office of Civil Rights (OCR), which also oversees compliance with HIPAA & HITECH requirements.

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What Access Points Are Addressed by Section 1557?

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Related Standards from The Joint Commission (TJC)

* TJC Standard RI.01.01.01
    * Element of Performance (EP) 3: The organization treats the individual in a dignified and respectful manner that supports his or her dignity.
    * EP 5: The organization respects the patient's right to and need for effective communication.

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Related Standards from TJC (Cont'd):

* TJC Standard RI.01.01.03
  * EP 1: The organization provides information in a manner tailored to the patient's age, language, and ability to understand.
  * EP 2: The organization provides interpreting and translation services, as necessary.
  * EP 3: The organization communicates with the patient who has vision, speech, hearing, or cognitive impairments in a manner that meets the patient's need.

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Related Standards from TJC (Cont'd):

* TJC Standard PC.02.01.01
  * EP 1 (PCMH option): The PCP and the interdisciplinary team identify the patient's oral and written communication needs, including the patient's preferred language for discussing health care.
  * EP 2 (PCMH option): The PCP and the interdisciplinary team communication with the patient during the provision of care, treatment, or services in a manner that meets the patient's oral and written communication needs.

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What Types of Services Are Addressed by Section 1557?

* Meaningful access for individuals with limited English proficiency (the term "LEP" is often used), including language assistance services provided by:

  * Qualified interpreters must be "proficient in speaking and understanding both spoken English and at least one other spoken language, including any necessary specialized vocabulary, terminology, and phraseology, and must be able to effectively, accurately, and impartially communication directly with individuals with limited English proficiency in their primary languages". Qualified interpreters must also adhere to interpreter ethics, including maintaining client confidentiality.

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Meaningful Access for Individuals with LEP:

* **Does Section 1557 require either licensure or certification for qualified interpreters? <u>No,</u> because the Office of Civil Rights (OCR) stated that it did not wish to unduly narrow the pool of qualified interpreters. The OCR noted that many interpreters who are currently unlicensed and uncertified are competent to do so.**

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Meaningful Access for Individuals with LEP (Cont'd):

* **Meaningful access for individuals with LEP also includes language assistance services provided by:**
  * **<u>Qualified bilingual/multilingual staff</u> who provide oral language assistance as part of their assigned job responsibilities . These staff members must determined to be "qualified" and must be "proficient in speaking and understanding both spoken English and at least one other spoken language, including any necessary specialized vocabulary, terminology, and phraseology, and must be able to effectively, accurately, and impartially communication directly with individuals with limited English proficiency in their primary languages".**

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Meaningful Access for Individuals with LEP (Cont'd):

* **Meaningful access for individuals with limited English proficiency also includes language assistance services provided that may be provided by a remote vendor, such as:**
  * **<u>Telephone interpreter/language line services:</u> FHCHC contracts with a language line vendor, Pacific Interpreters, which provides qualified interpreter services in <u>more than two hundred (200) languages</u>. Our language line vendor engages qualified interpreters that: a) have demonstrated proficiency in speaking and understanding both spoken English and at least one other language; and b) are able to effectively, accurately, and impartially communicate with individuals with LEP in their primary languages.**

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Meaningful Access for Individuals with LEP (Cont'd):

* **Meaningful access for individuals with limited English proficiency, can also include language assistance services provided by:**
  * <u>**Video-remote interpreting technology:**</u> **Section 1557 established specific requirements for this type of technology, including:**
    * **Real-time, full-motion video and audio over a dedicated high-speed, wide bandwidth connection that delivers high-quality video images;**
    * **A sharply delineated image that is large enough to display the interpreter's face and the participating patient's face regardless of the patient's body position;**
    * **A clear, audible transmission of voices; &**
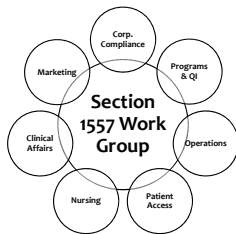   * **Adequate training to users of the technology.**

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How Our FQHC Addressed Section 1557

* **Corporate Compliance briefed other members of the Health Center's Executive Management Team in October 2016**
* **An inter-departmental Section 1557 Work Group was convened during the Autumn 2016**
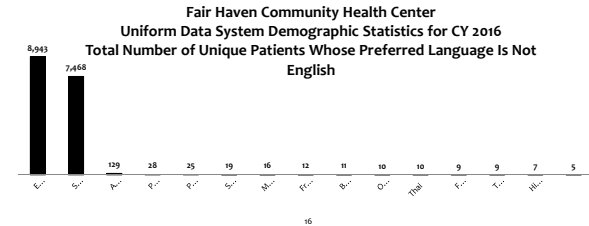* **Corporate Compliance briefed the Health Center's Board of Directors in January 2017**

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Section 1557 Work Group Representation

Corp. Compliance · Programs & QI · Marketing · Section 1557 Work Group · Operations · Clinical Affairs · Nursing · Patient Access

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Our Patients' Preferred Language

Fair Haven Community Health Center
Uniform Data System Demographic Statistics for CY 2016
Total Number of Unique Patients Whose Preferred Language Is Not English

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Steps Undertaken:

* **Determined whether to pilot the use of video-remote interpreting technology**
* **Trained staff about revisions to former policies and workflows**
* **Developed a workflow to link our after-hours answering service contractor with our telephonic interpreter contractor**
* **Developed a monthly Risk Management Dashboard, which includes a "# of Grievances field"**
  * **This permits ongoing monitoring for any Section 1557 grievances**

Steps Undertaken (Cont'd):

* **Monthly analysis of the utilization of telephone interpretation services**
* **Periodic analysis of the demand for on-site bilingual interpreter services by site (place of service) and clinical department (A query in Epic, our EHR)**
* **Added taglines to our brochures and updated sliding fee scale**
* **Obtained auxiliary aids for visually-impaired individuals**
* **Ongoing monitoring of the OCR's news releases**

Steps Undertaken (Cont'd):

* **A Nondiscrimination Statement has been posted in all of our Waiting Rooms, informing patients of their rights:**
  * **This information includes taglines in Spanish, Arabic, & Portuguese, which are the top 3 languages spoken by our patients whose preferred language is not English.**
  * **We downloaded the OCR's Nondiscrimination Statement, its Grievance Procedure, and Taglines in the Top 15 languages spoken in the State of CT. This Notice outlines Grievance procedures, including the contact information for our Section 1557 Grievance Coordinator**
  * **The VP for Operations is our Section 1557 Grievance Coordinator.**
* **Similar notices are also posted on our Web-site.**

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Steps Undertaken (Cont'd):

* **Posted "I Speak" cards at all of our Registration areas**
* **Revised the Health Center's role description for on-site Interpreters**
* **Engaged an independent consultant to provide English/Spanish health interpretation training**
* **Finalized an on-site training plan for a cohort of our bilingual clinical support staff -> Enhanced our number of qualified Spanish/English interpreters**
  * **Staff who successfully completed the training series, testing, and the ACTFL's Oral Proficiency Interview (OPI) received a $1.00 pay increase**

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Steps Undertaken (Cont'd):

* **Conducting periodic audits of the completion of the "Preferred Language" field in Epic**
* **Documenting health literacy assessment in Epic**
* **Adding a large print field to our current Web-site**
* **Developed a draft written language access plan, outlining our implementation of Section 1557 requirements**
* **Policy development & posting of all Board-approved policies on our SharePoint site**

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Policy Enhancements on SharePoint

* *ASL Interpreting for Hearing-impaired Patients* **policy**
* *On-site Interpreter Services* **policy**
* *Pilot for Qualified Interpreter Training* **policy**
* *Service Animals Accompanying Individuals at the Health Center* **policy**
* *Telephone Interpretation Services* **policy**

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Meaningful Communication for Individuals with Disabilities:

* **American Sign Language (ASL) Interpretation: To provide access to individuals who are deaf or hard of hearing (HOH), Fair Haven contracts with LifeBridgeCT, which provides on-site ASL interpretation for patients who are hearing impaired (i.e., deaf or hard of hearing).**
* **For telecommunications with individuals who are deaf or HOH, outbound calls to our patients can be made by dialing 711.**

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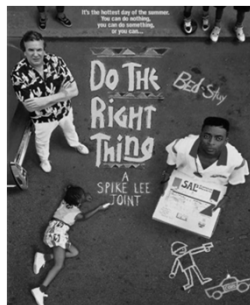
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Thank You for Your Participation!

Any questions?