



95TH GENERAL ASSEMBLY

State of Illinois

2007 and 2008

HB1072

Introduced 2/8/2007, by Rep. William Davis

SYNOPSIS AS INTRODUCED:

210 ILCS 87/15

Amends the Language Assistance Act. Makes changes in the list of things a health facility must do to ensure access to health care information and services for limited-English-speaking or non-English-speaking residents and deaf residents. Provides that a facility must do all (instead of one or more) of the following: (1) adopt and review annually a policy for providing language assistance services to patients with language or communication barriers; (2) develop and post notices that advise patients and their families of the availability of interpreters; and (3) notify the facility's employees of the language services available at the facility and train them on how to make these language services available to patients. Provides that, in addition, a facility may do one or more of the following: (i) review existing policies regarding interpreters; (ii) adopt a policy for language assistance services that includes certain procedures; (iii) identify and record a patient's primary language and dialect; (iv) prepare a list of interpreters; (v) review standardized forms and other materials; (vi) consider providing its nonbilingual staff with standardized picture and phrase sheets; and (vii) develop community liaison groups. Effective immediately.

LRB095 08191 DRJ 28358 b

FISCAL NOTE ACT
MAY APPLY

STATE MANDATES
ACT MAY REQUIRE
REIMBURSEMENT

A BILL FOR

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Language Assistance Services Act is amended
5 by changing Section 15 as follows:

6 (210 ILCS 87/15)

7 Sec. 15. Language assistance services.

8 (a) To insure access to health care information and
9 services for limited-English-speaking or non-English-speaking
10 residents and deaf residents, a health facility must do ~~one or~~
11 ~~more of~~ the following:

12 ~~(1) Review existing policies regarding interpreters~~
13 ~~for patients with limited English proficiency and for~~
14 ~~patients who are deaf, including the availability of staff~~
15 ~~to act as interpreters.~~

16 (1) ~~(2)~~ Adopt and review annually a policy for
17 providing language assistance services to patients with
18 language or communication barriers. ~~The policy shall~~
19 ~~include procedures for providing, to the extent possible as~~
20 ~~determined by the facility, the use of an interpreter~~
21 ~~whenever a language or communication barrier exists,~~
22 ~~except where the patient, after being informed of the~~
23 ~~availability of the interpreter service, chooses to use a~~

1 ~~family member or friend who volunteers to interpret. The~~
2 ~~procedures shall be designed to maximize efficient use of~~
3 ~~interpreters and minimize delays in providing interpreters~~
4 ~~to patients. The procedures shall insure, to the extent~~
5 ~~possible as determined by the facility, that interpreters~~
6 ~~are available, either on the premises or accessible by~~
7 ~~telephone, 24 hours a day.~~ The facility shall annually
8 transmit to the Department of Public Health a copy of the
9 updated policy and shall include a description of the
10 facility's efforts to insure adequate and speedy
11 communication between patients with language or
12 communication barriers and staff.

13 (2) ~~(3)~~ Develop, and post in conspicuous locations,
14 notices that advise patients and their families of the
15 availability of interpreters, the procedure for obtaining
16 an interpreter, and the telephone numbers to call for
17 filing complaints concerning interpreter service problems,
18 including, but not limited to, a T.D.D. number for the
19 hearing impaired. The notices shall be posted, at a
20 minimum, in the emergency room, the admitting area, the
21 facility entrance, and the outpatient area. Notices shall
22 inform patients that interpreter services are available on
23 request, shall list the languages for which interpreter
24 services are available, and shall instruct patients to
25 direct complaints regarding interpreter services to the
26 Department of Public Health, including the telephone

1 numbers to call for that purpose.

2 ~~(4) Identify and record a patient's primary language~~
3 ~~and dialect on one or more of the following: a patient~~
4 ~~medical chart, hospital bracelet, bedside notice, or~~
5 ~~nursing card.~~

6 ~~(5) Prepare and maintain, as needed, a list of~~
7 ~~interpreters who have been identified as proficient in sign~~
8 ~~language and in the languages of the population of the~~
9 ~~geographical area served by the facility who have the~~
10 ~~ability to translate the names of body parts, injuries, and~~
11 ~~symptoms.~~

12 (3) ~~(6)~~ Notify the facility's employees of the language
13 assistance services available at the facility and train
14 them on how to make these language assistance services
15 available to patients ~~facility's commitment to provide~~
16 ~~interpreters to all patients who request them.~~

17 (b) In addition to the requirements imposed under
18 subsection (a), a health facility may do one or more of the
19 following:

20 (1) Review existing policies regarding interpreters
21 for patients with limited English proficiency and for
22 patients who are deaf, including the availability of staff
23 to act as interpreters.

24 (2) Adopt a policy for language assistance services
25 that shall include procedures for providing, to the extent
26 possible as determined by the facility, the use of an

1 interpreter whenever a language or communication barrier
2 exists, except when the patient, after being informed of
3 the availability of the interpreter service, chooses to use
4 a family member or friend who volunteers to interpret. The
5 procedures shall be designed to maximize efficient use of
6 interpreters and minimize delays in providing interpreters
7 to patients. The procedures shall ensure, to the extent
8 possible as determined by the facility, that interpreters
9 are available, either on the premises or accessible by
10 telephone, 24 hours a day and shall include a description
11 of the facility's efforts to ensure adequate and speedy
12 communication between patients with language or
13 communication barriers and staff.

14 (3) Identify and record a patient's primary language
15 and dialect on one or more of the following: a patient
16 medical chart, hospital bracelet, bedside notice, or
17 nursing card.

18 (4) Prepare and maintain, as needed, a list of
19 interpreters who have been identified as proficient in sign
20 language and in the languages of the population of the
21 geographical area served by the facility who have the
22 ability to translate the names of body parts, injuries, and
23 symptoms.

24 (5) ~~(7)~~ Review all standardized written forms,
25 waivers, documents, and informational materials available
26 to patients on admission to determine which to translate

1 into languages other than English.

2 (6) ~~(8)~~ Consider providing its nonbilingual staff with
3 standardized picture and phrase sheets for use in routine
4 communications with patients who have language or
5 communication barriers.

6 (7) ~~(9)~~ Develop community liaison groups to enable the
7 facility and the limited-English-speaking,
8 non-English-speaking, and deaf communities to insure the
9 adequacy of the interpreter services.

10 (Source: P.A. 93-564, eff. 1-1-04.)

11 Section 99. Effective date. This Act takes effect upon
12 becoming law.