January 24, 2012

**VIA MAIL & EMAIL**

Vice President for Corporate Affairs

The Hospital

*Re: Language Assistance*

Dear Mr. Vice President:

 Thank you for meeting with us on January 10th to discuss our concerns relating to the Hospital’s failure to provide adequate and appropriate language assistance services to patients with limited English proficiency (LEP). We appreciate that you are taking these concerns seriously and are willing to take immediate measures to rectify the problems that were discussed at the meeting and in our letter.

We have reviewed the “to do” items you listed in your January 11th email to us concerning the steps you plan to take to ensure that the Hospital complies with federal and state language assistance laws. Based on the concerns we raised during our meeting with you, we would like to add several items to your list, including:

* Posting signage in appropriate areas regarding the availability of free language assistance services in public entry locations and other public locations
* Posting signage to help LEP patients locate various departments, including the Radiology Department, within the Hospital
* Translating significant hospital forms, including consent forms, discharge notices and instructions, and financial assistance documents and applications into languages, including Spanish, spoken by more than 1% of LEP groups in the Hospital’s service area
* Implementing a language access policy that ensures that family members will not be used as interpreters, unless the patient agrees to their use or refuses the free interpretation services offered by the Hospital.
* Ensuring that physicians and residents, with some knowledge of Spanish or another language, have the appropriate competency to communicate effectively with LEP patients
* Developing policies and procedures to assist LEP patients with Medicaid applications
* Refraining from directing LEP patients in need of language assistance services to North Fork Spanish Apostolate or other organizations for assistance with Medicaid applications or bills without a formal contractual arrangement to provide these services;
* Ensuring that LEP patients receive follow-up calls after discharge or treatment in their language of preference

While we appreciate your efforts to take affirmative steps to remedy deficiencies in your language access policies, we still have general – more global - concerns about the adequacy of your efforts. In particular, we are troubled by the fact that only one person appears to be responsible for providing all live interpretation, document translation, and oversight of the Hospital’s language assistance services, despite the sizeable population of LEP patients in your catchment area. In addition, we are concerned that the hospital appears to lack any mechanism to coordinate language assistance services across its various departments, which makes it difficult for LEP patients to access the care they need. Lastly, we remain concerned that LEP patients receiving care in the Emergency Room do not consistently receive language assistance services – despite the critical need for such services at this stage of care.

We believe that the Hospital’s current deficiencies in language assistance services identified in our letter and during our meeting on January 10th jeopardize patient safety and the ability of patients make informed decisions about their care in addition to violating their rights under federal and state laws. Therefore, it is imperative that you develop and share with us a comprehensive plan to evaluate the language assistance needs of the community you serve and to address the “to do” items on your list as well as the those enumerated in this letter. The plan should include time frames by which adequate services will be in place and identification of any outside assistance that the hospital will rely on to come into compliance. .

Kindly provide us with a copy this plan along and the hospital’s language assistance policies, which should include identification of the LEP populations you serve and the person at your hospital who bears primary responsibility for providing language assistance services and ensuring that the services offered are adequate to meet the needs of LEP patients in your service area, within thirty days of receipt of this letter.

We look forward to monitoring your progress.

Sincerely,

Linda R. Hassberg, Esq. Jennifer Torres Sister Margaret Smyth

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