

AMENDED IN SENATE JUNE 19, 2015

AMENDED IN SENATE JUNE 2, 2015

AMENDED IN ASSEMBLY APRIL 9, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

**ASSEMBLY BILL**

**No. 389**

---

---

**Introduced by Assembly Member Chau**

February 18, 2015

---

---

An act to amend Section 1259 of, and to add Section 128731 to, the Health and Safety Code, relating to health facilities.

LEGISLATIVE COUNSEL'S DIGEST

AB 389, as amended, Chau. Hospitals: language assistance services.

(1) Existing law provides for the licensure and regulation by the State Department of Public Health of health facilities, including general acute care hospitals. A violation of these provisions is a crime. Existing law requires those hospitals to adopt and review annually a policy for providing language assistance services to patients with language or communication barriers, as defined. Existing law requires a hospital to annually transmit to the department a copy of its updated policy and to include a description of its efforts to ensure adequate and speedy communication between patients with language or communication barriers and staff.

This bill would require a general acute care hospital and the department to make the hospital's updated policy available *annually* to the public on their respective Internet Web sites. The bill would also require a general acute care hospital to post on its Internet Web site a notice, in English and ~~up to~~ *in* the ~~5~~ other most commonly spoken languages in the hospital's service area, of the availability of language

assistance services. The bill would also, if another technology emerges that replaces Internet Web sites, require the department, by regulation, to require a general acute care hospital to make its updated policy available through that subsequent technology. The bill would also require the department to make that policy available through that new technology. Because a violation of these provisions by a health facility would be a crime, the bill would impose a state-mandated local program.

(2) Existing law creates the Office of Statewide Health Planning and Development, prescribes the office’s powers and duties, and designates the office as the single state agency to collect specified data from health facilities and clinics for use by all state agencies.

This bill would require a general acute care hospital to annually file with the office the policy described in (1) above for providing language assistance services to patients with language or communication barriers. The bill would require the office to make that policy available to the public on the office’s Internet Web site or through a subsequent technology that replaces Internet Web sites.

(3) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: yes.

*The people of the State of California do enact as follows:*

1 SECTION 1. Section 1259 of the Health and Safety Code is  
2 amended to read:  
3 1259. (a) (1) The Legislature finds and declares that California  
4 is becoming a land of people whose languages and cultures give  
5 the state a global quality. The Legislature further finds and declares  
6 that access to basic health care services is the right of every resident  
7 of the state, and that access to information regarding basic health  
8 care services is an essential element of that right.  
9 (2) Therefore, it is the intent of the Legislature that when  
10 language or communication barriers exist between patients and  
11 the staff of any general acute care hospital, arrangements shall be  
12 made for interpreters or bilingual professional staff to ensure  
13 adequate and speedy communication between patients and staff.

1 (b) As used in this section:

2 (1) “Interpreter” means a person fluent in English and in the  
3 necessary second language, who can accurately speak, read, and  
4 readily interpret the necessary second language, or a person who  
5 can accurately sign and read sign language. Interpreters shall have  
6 the ability to translate the names of body parts and to describe  
7 competently symptoms and injuries in both languages. Interpreters  
8 may include members of the medical or professional staff.

9 (2) “Language or communication barriers” means:

10 (A) With respect to spoken language, barriers that are  
11 experienced by individuals who are limited-English-speaking or  
12 non-English-speaking individuals who speak the same primary  
13 language and who comprise at least 5 percent of the population of  
14 the geographical area served by the hospital or of the actual patient  
15 population of the hospital. In cases of dispute, the state department  
16 shall determine, based on objective data, whether the 5 percent  
17 population standard applies to a given hospital.

18 (B) With respect to sign language, barriers that are experienced  
19 by individuals who are deaf and whose primary language is sign  
20 language.

21 (c) To ensure access to health care information and services  
22 for limited-English-speaking or non-English-speaking residents  
23 and deaf residents, licensed general acute care hospitals shall:

24 (1) Review existing policies regarding interpreters for patients  
25 with limited-English proficiency and for patients who are deaf,  
26 including the availability of staff to act as interpreters.

27 (2) (A) (i) Adopt and review annually a policy for providing  
28 language assistance services to patients with language or  
29 communication barriers. The policy shall include procedures for  
30 providing, to the extent possible, as determined by the hospital,  
31 the use of an interpreter whenever a language or communication  
32 barrier exists, except when the patient, after being informed of the  
33 availability of the interpreter service, chooses to use a family  
34 member or friend who volunteers to interpret. The procedures shall  
35 be designed to maximize efficient use of interpreters and minimize  
36 delays in providing interpreters to patients. The procedures shall  
37 ensure, to the extent possible, as determined by the hospital, that  
38 interpreters are available, either on the premises or accessible by  
39 telephone, 24 hours a day.

1 (ii) The hospital ~~shall~~ *shall, on or before July 1, 2016, and every*  
2 *January 1 thereafter,* make the updated policy and a notice of  
3 availability of language assistance services available to the public  
4 on its Internet Web site. The notice shall be in English and ~~up to~~  
5 ~~the five~~ *in the* other languages most commonly spoken in the  
6 hospital's service area. *For purposes of this paragraph, the hospital*  
7 *shall make the notice available in the language of individuals who*  
8 *meet the definition of having a language barrier pursuant to*  
9 *subparagraph (A) of paragraph (2) of subdivision (b); however,*  
10 *a hospital is not required to make the notice available in more*  
11 *than five languages other than English.* If another technology  
12 emerges that takes the place of Internet Web sites, the state  
13 department shall direct the hospital, by regulations adopted  
14 pursuant to the rulemaking procedures of the Administrative  
15 Procedure Act (Chapter 3.5 (commencing with Section 11340) of  
16 Part 1 of Division 3 of Title 2 of the Government Code), to make  
17 the information required pursuant to this section available through  
18 the subsequent technology.

19 (B) (i) The hospital ~~shall annually~~ *shall, on or before July 1,*  
20 *2016, and every January 1 thereafter,* transmit to the department  
21 a copy of the updated policy and shall include a description of its  
22 efforts to ensure adequate and speedy communication between  
23 patients with language or communication barriers and staff.

24 (ii) The department shall make the updated policy available to  
25 the public on its Internet Web site. If another technology emerges  
26 that replaces Internet Web sites, the department shall make the  
27 information required pursuant to this section available through  
28 that subsequent technology.

29 (3) Develop, and post in conspicuous locations, notices that  
30 advise patients and their families of the availability of interpreters,  
31 the procedure for obtaining an interpreter and the telephone  
32 numbers where complaints may be filed concerning interpreter  
33 service problems, including, but not limited to, a T.D.D. number  
34 for the hearing impaired. The notices shall be posted, at a  
35 minimum, in the emergency room, the admitting area, the entrance,  
36 and in outpatient areas. Notices shall inform patients that interpreter  
37 services are available upon request, shall list the languages for  
38 which interpreter services are available, shall instruct patients to  
39 direct complaints regarding interpreter services to the state  
40 department, and shall provide the local address and telephone

1 number of the state department, including, but not limited to, a  
2 T.D.D. number for the hearing impaired.

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

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

11 (6) Notify employees of the hospital's commitment to provide  
12 interpreters to all patients who request them.

13 (7) Review all standardized written forms, waivers, documents,  
14 and informational materials available to patients upon admission  
15 to determine which to translate into languages other than English.

16 (8) Consider providing its nonbilingual staff with standardized  
17 picture and phrase sheets for use in routine communications with  
18 patients who have language or communication barriers.

19 (9) Consider developing community liaison groups to enable  
20 the hospital and the limited-English-speaking and deaf communities  
21 to ensure the adequacy of the interpreter services.

22 (d) Noncompliance with this section shall be reportable to  
23 licensing authorities.

24 (e) Section 1290 shall not apply to this section.

25 SEC. 2. Section 128731 is added to the Health and Safety Code,  
26 to read:

27 128731. (a) A licensed general acute care hospital ~~shall~~  
28 *annually shall, on or before July 1, 2016, and every January 1*  
29 *thereafter,* file with the office a policy for providing language  
30 assistance services to patients with language or communication  
31 barriers required pursuant to paragraph (2) of subdivision (c) of  
32 Section 1259.

33 (b) The office shall make the hospital policy available to the  
34 public on the office's Internet Web site. If another technology  
35 emerges that replaces Internet Web sites, the office shall make the  
36 hospital policy available through that subsequent technology.

37 SEC. 3. No reimbursement is required by this act pursuant to  
38 Section 6 of Article XIII B of the California Constitution because  
39 the only costs that may be incurred by a local agency or school  
40 district will be incurred because this act creates a new crime or

1 infraction, eliminates a crime or infraction, or changes the penalty  
2 for a crime or infraction, within the meaning of Section 17556 of  
3 the Government Code, or changes the definition of a crime within  
4 the meaning of Section 6 of Article XIII B of the California  
5 Constitution.

O