

Limited English proficiency among parents associated with increased length of hospital stay

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Among children whose parents and other primary caregivers have limited English proficiency, there is an associated increased length of hospital stay and decreased number of home health care referrals for pediatric inpatients with infections requiring long-term antibiotics, according to a report in the May issue of *Archives of Pediatrics & Adolescent Medicine*.

"A language other than English is spoken in 14 million U.S. households by more than 55 million (roughly one in five) U.S. residents, nearly half of whom describe themselves as having limited English proficiency (LEP) or speaking English less than very well," the authors write as background information in the article. "Medical communities across the nation are faced with communication challenges that accompany such a linguistically diverse population."

Michael N. Levas, M.D., and colleagues from Children's Mercy Hospitals and Clinics, Kansas City, MO, evaluated 1,257 pediatric inpatients from an urban, tertiary care, freestanding Midwestern children's hospital serving as a regional pediatric referral center to examine the relationship between limited English proficiency and length of hospital stay and home health care referral status.

Among the <u>parents</u> or primary <u>caregivers</u> of the 1,257 pediatric patients, 39 (3.1 percent) had limited English proficiency and 1,218 (96.9



percent) were proficient in English. Patients with LEP were more likely to be Latino and either uninsured or insured by Medicaid. The median (midpoint) length of hospital stay for all patients was 4.1 days, however the median length of stay for patients with LEP was longer than that of proficient English-speaking patients (6.1 days vs. 4.0 days respectively).

Patients with LEP were also less likely to receive a home health care referral, which occurred for 32.6 percent of English-proficient patients and 6.9 percent of patients with LEP. Having Medicaid insurance was also associated with a decreased number of home health care referrals.

"With the population of people with LEP in the United States growing exponentially, the medical community must ensure that all patients with LEP receive adequate interpreter services," the authors conclude. "Increasing the number and quality of trained medical interpreters and translators, improving the infrastructure for a multilingual approach to care, and further minimizing multitiered care based on language are important areas for advocacy."

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