



Florida Perinatal  
Quality Collaborative

## Recommendations for Families with Limited English Proficiency

The following information is taken from Table 14 of Smith et al., 2022, NICU discharge preparation and transition planning: guidelines and recommendations.

<https://doi.org/10.1038/s41372-022-01313-9>

### Interpreter Use

- Certified medical interpreters should be used for all discharge education and the discharge planning meeting, with the order of preference being in-person, video, or phone. Discharge materials should be delivered in the family's preferred language and communication mode.
- Provide a medical interpreter when any caregiver has limited English proficiency. Family members may not be able to accurately interpret for each other, especially about medically complex concepts.
- Plan ahead when using an interpreter. Additional time is needed to coordinate interpreter availability, family needs, and time needed for the team to process information, reflect, and consider additional questions.
- Family comprehension of the discharge education and awareness of scheduled medical follow-up appointments should be confirmed by return demonstrations of their knowledge with interpreters.

### Family Member Used as an Interpreter

- Family members should only be used to help interpret if a certified medical interpreter is not available or in an emergent situation. A minor should not be used as a family interpreter. After a family member has been used as an emergency interpreter, a certified medical interpreter should be brought in as soon as feasible to verify the family's understanding of the information.

### Patient-Related Information

- Provide families with discharge materials in their preferred language. These materials should be written in a manner that is simple, clear, concise, and without medical jargon to aid understanding and decrease confusion.
- Translate patient-related information and medical records into the family's preferred language or mode of communication by medically certified translators.

### Computer Translation Services

- Items that are translated via a computer translation service should be verified by a certified medical interpreter for clarity and accuracy.

### **Hospital Navigation**

- Develop a plan, note, or card for families to use to identify themselves as having a child currently in the NICU. Families may have difficulty accessing and navigating the hospital because they are unable to communicate with security/front desk staff or read signs.

### **Social Support**

- Families with limited English proficiency benefit from additional support from social work or peer-to-peer support programs as they prepare for discharge.

### **Primary Care Involvement**

- A primary care provider should be chosen prior to discharge because culturally and linguistically appropriate options for a medical home may be more limited. If the family has not chosen a primary care provider, the NICU team can help them make this selection.

### **Parental Mental Health**

- Recognize that mental health issues can be more difficult to identify, monitor, and treat in families with cultural and linguistic differences. Any depression or mental health screening of parents must be translated and adapted so that it is culturally accurate and appropriate.