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Title

Enhancing Provider Confidence in Communicating with Patients with Limited English Proficiency (LEP) through Patient Letters

Priority 1 (Research Category)

Health Care Disparities

Presenters

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Abstract

Context

Effective communication with patients with limited English proficiency (LEP) is a significant challenge in healthcare, often leading to poorer health outcomes and patient dissatisfaction.

Objective

This study aims to assess healthcare providers' confidence and practices in using patient letters to communicate with patients with LEP, enhance communication strategies, and improve health outcomes.

Study Design

A cross-sectional survey was conducted using REDCap to collect quantitative and qualitative data from healthcare providers. The survey included questions on demographics, physician confidence, communication practices, and challenges. Data analysis was performed using GraphPad Prism software v10, employing paired t-tests to compare confidence and evaluation levels across different demographics and practice settings.

Setting/Dataset

The study was conducted within the University of Vermont Medical Center (UVMMC), encompassing primary care and other subspecialties.

Population Studied

The survey targeted healthcare providers within UVMMC, with a response rate of 46 out of 252 (18.25%) for invited participants. The sample included providers varying across gender, experience, department, and technological expertise.

Intervention/Instrument

Data were collected via a structured REDCap survey.

Outcome Measures

The primary outcome measures were providers' self-reported confidence levels in communicating through letters to patients with LEP and ensuring patient comprehension. Secondary measures included the identification of common challenges and preferred methods of communication with patients with LEP.

Results

The study revealed gaps in healthcare providers' familiarity and confidence when communicating via patient letters to patients with LEP. Confidence levels among providers were significantly lower when addressing patients with LEP compared to interactions with general patient populations, and this was consistent regardless of the frequency of interaction with patients with LEP. Providers agreed there was difficulty in patient comprehension, time constraints, limited cultural understanding, and lack of access.

Conclusions

The findings suggest a need for improved training, resources, and formal communication strategies to improve provider confidence and effectiveness in communicating with patients with LEP. By addressing challenges and leveraging specific communication methods, healthcare providers can improve patient outcomes and satisfaction.