

When facing language barriers, having the same home health nurse improves outcomes

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After a hospitalization, home health care enables patients to recover where they feel most comfortable: in their own home. Nurses visit patients there to provide care with the goal of keeping them at home,

given that hospital readmissions cost the U.S. health care system more than \$41 billion each year.

A new study finds that for people who have limited ability to communicate in English, having the same home health nurse across visits significantly decreases hospital readmissions, regardless of whether the patient and nurse speak the same [language](#). The findings, published in the journal *Medical Care*, can inform how home health agencies staff the care of patients with limited English proficiency by having the same provider throughout a patient's care.

"While having both the continuity of the same nurse across multiple visits and a nurse who speaks the same language as the patient is ideal, enhancing continuity of care for those where there is language discordance between themselves and the [health care provider](#) may be helpful to address disparities and reduce hospital readmission rates," said Allison Squires, Ph.D., RN, FAAN, associate professor at NYU Rory Meyers College of Nursing and the study's lead author.

Improving outcomes in home care

Research shows that home care patients who speak a language other than English are at a higher risk for readmission to the hospital. Language gaps between patients and [health care providers](#) contribute to disparities in [health outcomes](#) and may be particularly challenging in [home health care](#). Home care agencies frequently rely on telephone interpretation services since many of their clients do not have the level of internet access needed for video interpretation. Interpreter services are often not reimbursed by insurance unless state law requires it.

"Home care agencies should aim to hire and retain nurses that speak the same languages as their patients, but realistically, there are not enough nurses to meet this demand," said Squires.

A growing body of research shows that having the same provider—known as continuity of care—across multiple home care visits can improve health outcomes and may be a more viable staffing solution to prevent hospital readmissions.

Same nurse or same language?

To understand the impact of having a consistent provider or someone who speaks the same language on hospital readmissions, the researchers examined data from 22,103 patients who were receiving home care in New York City following a hospitalization. The patients spoke Spanish, Korean, Chinese, or Russian as their primary language.

The researchers found that having the same nurse across home care visits who also spoke the same language as the patient had the best chance of reducing the risk of hospital readmissions. However, having the same nurse across home care visits, even if they didn't speak the same language as the patient, was also linked to lower [hospital readmissions](#). Having different nurses increased the risk of readmission with this population, but risk varied by language.

"It is thought that the more often a nurse interacts with a patient, the more likely they are to get to know them and their family or caregivers, regardless of whether there is a language barrier," said Squires.

What this means for home health care agencies

The researchers conclude that health care providers should focus on maximizing continuity of care after hospitalization—particularly when language barriers cannot be addressed directly through staffing.

"For providers referring [patients](#) to home health care services and

coordinating these referrals, it may be worth considering an agency's ability to support continuity of skilled nursing care to reduce the odds of hospital readmission," said Squires. "Home health care organizations should assign providers with an eye towards ensuring that a patient's preferred nurse can remain involved in their treatment throughout their care."

Squires notes that being able to assign the same home [health nurse](#) across visits has its own challenges, given the home care industry's difficulty attracting and retaining providers and their heavy reliance on per-diem workers.

"Achieving [continuity of care](#) is only possible if a home care organization is able to recruit and retain [nurses](#)," said Squires.

Additional study authors include Patrick Engel, Chenjuan Ma, and Simon Jones of NYU; Sarah Miner of St. John Fisher University; and Penny H. Feldman and Margaret V. McDonald of VNS Health.

More information: Allison Squires et al, Continuity of Care Versus Language Concordance as an Intervention to Reduce Hospital Readmissions From Home Health Care, *Medical Care* (2023). [DOI: 10.1097/MLR.0000000000001884](#)

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