

## EVIDENCE BRIEF

# Patient–physician language concordance and quality and safety outcomes among frail home care recipients admitted to hospital

### PURPOSE AND BACKGROUND

Frail, older adults are often medically complex and experience multiple illnesses or diseases, contributing to a greater likelihood of experiencing harm when admitted to a hospital. Older adults are also more likely to experience communication difficulties. This study examined the influence of patient-physician language concordance (i.e. speaking the same language) on hospital related outcomes among home care recipients in Ontario, Canada.

### KEY FINDINGS

- Francophones and Allophones (i.e. Ontario residents who speak a primary language other than French or English) who received language concordant physician care in hospital were **less likely** to experience an adverse events (36% and 74% reduction, respectively), **more likely** to have shorter hospital stays (7% and 23% decreased length of stay, respectively) and **less likely** to die in hospital (24% and 54% reduced odds, respectively) than their counterparts who received language discordant care.
- Although the benefits of receiving language concordant care were more noticeable for allophone patients, only 1.6% of Allophones received care in their own language compared to 44.4% of Francophones.
- Following discharge from the hospital, language concordance was not associated with rates of return emergency department (ED) visits, readmissions to hospital or death within 30 days of discharge.

### POLICY CONSIDERATIONS

- Hospital administrators should identify patient’s language and consider implementing measures to increase the provision of language concordant care, such as providing translation services and, when possible, ensuring patients are receiving care from a provider who speaks their language.
- Such efforts have the potential to improve patient experiences, health outcomes and hospital efficiencies (i.e. shorter hospital stays represent a lower use of resources and a greater availability of beds).

### INTERPRETATIONS

- The benefits of language concordant care may be explained by better communication, which can lead to more accurate and timely diagnoses by physicians. When faced with language barriers, physicians are more likely to perform additional tests, which can increase the risk of harm, and length of stay in hospital.
- Higher rates of bilingualism in the Francophone population may explain why Allophones experienced greater benefits from language concordant care (i.e. Francophones are less likely to experience severe language barriers).
- The lack of association between language concordance and return ED visits, hospital readmissions, or death may be explained by a preference among home care recipients for community-based care over hospital-based care.

For more information, see: Seale, E., Reaume, M., Batista, R., Eddeen, A. B., Roberts, R., Rhodes, E., ... & Tanuseputro, P. [Patient–physician language concordance and quality and safety outcomes among frail home care recipients admitted to hospital in Ontario, Canada](https://doi.org/10.1503/cmaj.2022.19426). CMAJ. 2022; 194(26) : E899-E908.

For questions or comments, please contact Dr. Peter Tanuseputro ([ptanuseputro@toh.ca](mailto:ptanuseputro@toh.ca)).

This evidence brief was developed in partnership with the Ontario SPOR Support Unit Francophone Initiative. Visit us at <https://savoirmontfort.ca/initiative-francophone/>