

# Communication Sheet for Japanese Patients

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## BACKGROUND:

Language and cultural barriers can affect non-English speakers' access to healthcare. Because two Japanese-speaking physicians work at this health center, Japanese patients in the urban area commonly seek primary care there. However, no nurses speak Japanese, which can slow down clinic flow and negatively affect patients' satisfaction with care. We developed a Japanese-English Communication Sheet (JECS) to fill the gap during the rooming process because our nursing staff do not speak Japanese.

## METHODS:

We conducted this observational study at a single-site Family Medicine residency clinic in an urban setting from November 2019 to August 2020. Japanese patients participated in this study during primary care appointments, when they were seen by two Japanese-speaking physicians. Patients receiving telemedicine visits were excluded. The JECS was written in Japanese and English to address common sources of confusion by explaining differences between care processes in Japan and the United States. At the end of office visits, participating patients completed questionnaires that included self-evaluation of English level and helpfulness of the JECS. UPMC Wolf Center approved this Quality Improvement project.

## RESULTS:

Sixty participants completed the study; 85% (51/60) of participants was female, and mean participant age was 39. Visit type included Well Child Care (51%), followed by acute visit (27%). Among participants, 57% (34/60) found the JECS useful. The JECS was useful for most of Japanese patients, especially for patients with basic level compared to those with advanced English level [p = 0.024]

## DISCUSSION:

A JECS was useful for Japanese patients with limited English proficiency. Tool limitations include its inability to address patients' agenda in detail and it may require regular reminder to nursing staff for use. Also, patients may have underestimated their level of English proficiency because of cultural humbleness and overvalued the sheet's usefulness. We could not use the sheet for telemedicine visit. For the next step, we will incorporate this sheet into routine clinic flow, create other versions, and apply this idea to other language and cultures.

## Addressing Cultural Barriers A Japanese-English Communication Sheet was useful for Japanese patients with limited English proficiency.

### A Japanese-English Communication Sheet (Excerpt)

1. What is your date of birth? 誕生日はいつですか?  
(Month → Date → Year の順) 例 Example: April 4<sup>th</sup>, 1988

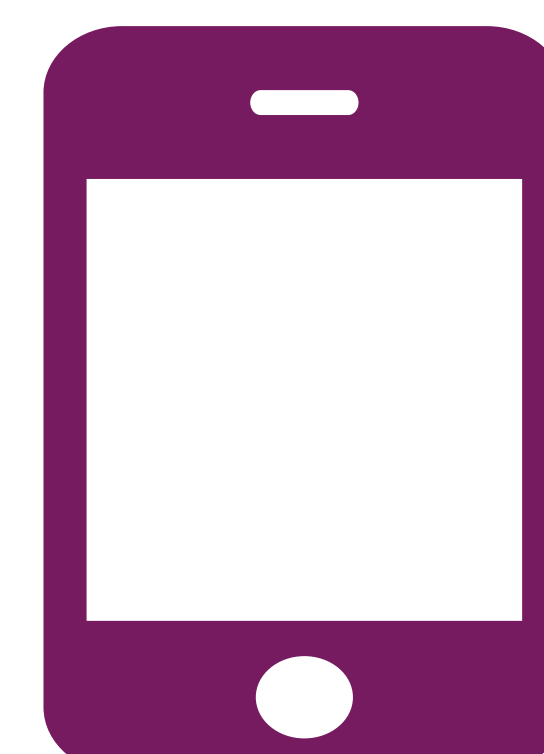
Japan: Year → Month → Date

3. What pharmacy would you like to use for your medications?  
薬が処方された時、どの薬局を使いますか? (米国では電子処方が可能です。お近くの薬局の名前と住所を伝えて下さい。)  
Ex.) CVS Pharmacy Target, 6231 Penn Ave, 15206

No electronic prescription system in Japan



A Japanese-English Communication Sheet



More detailed information

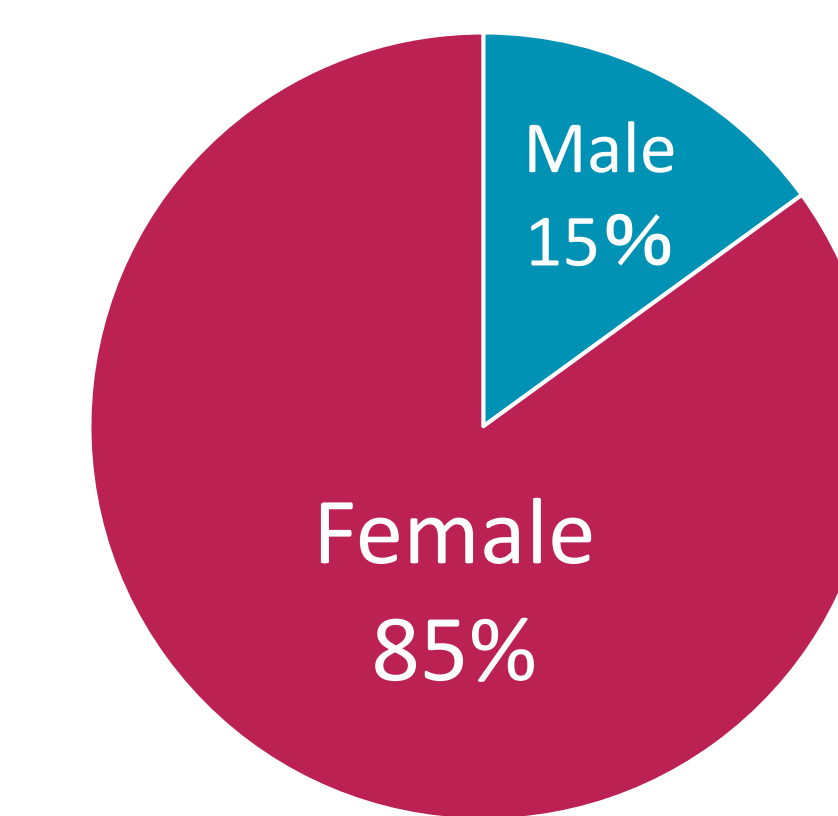


Figure 1. Gender

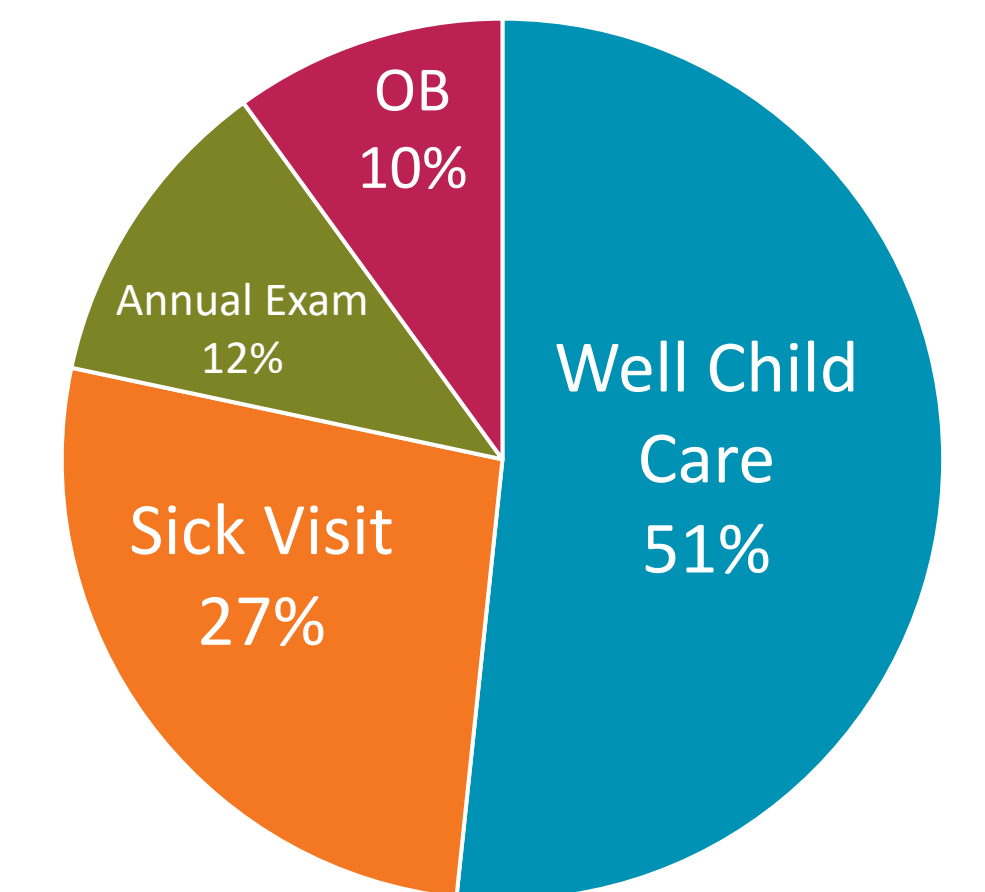


Figure 2. Visit Type

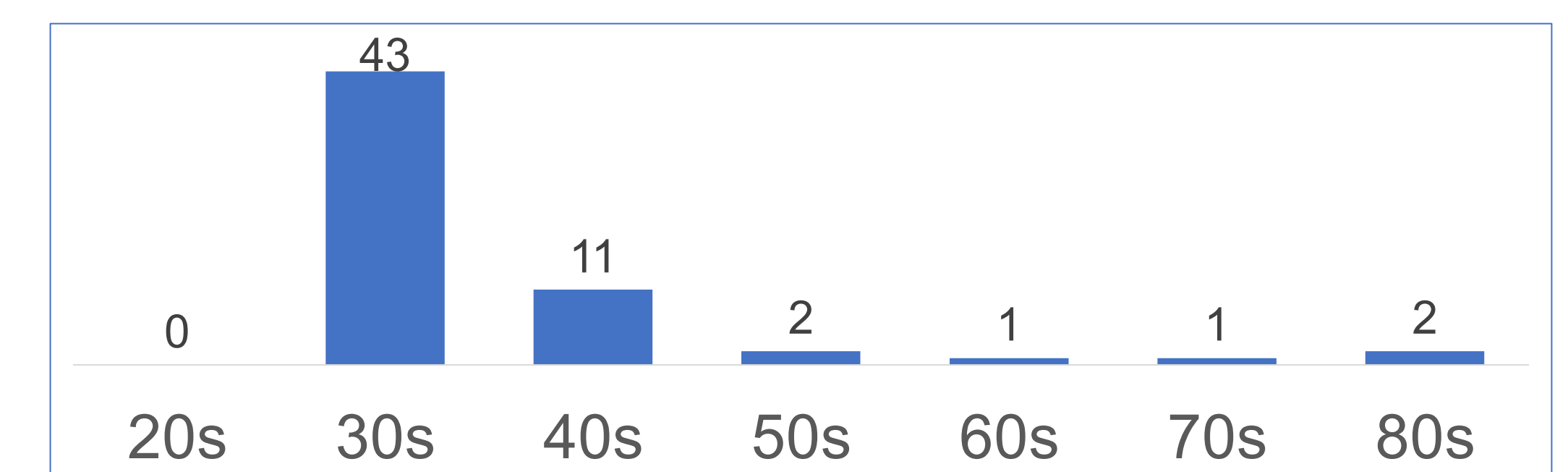


Figure 3. Age Group

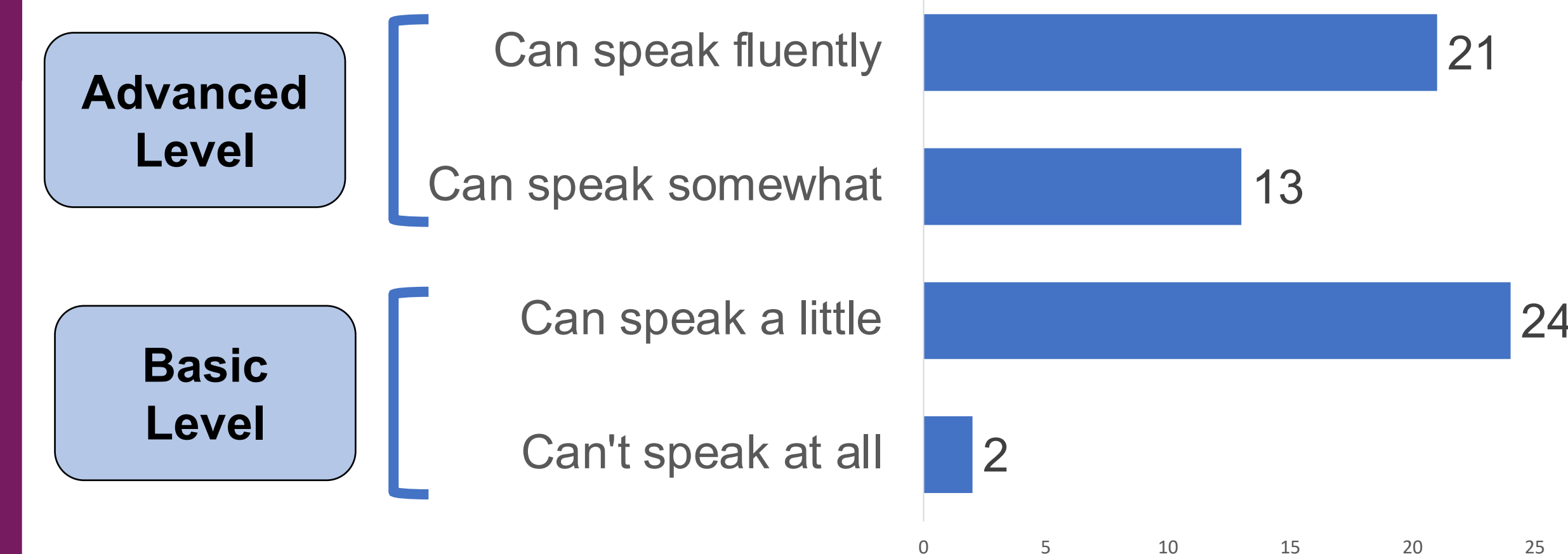


Figure 4. Self-reported English Proficiency Level

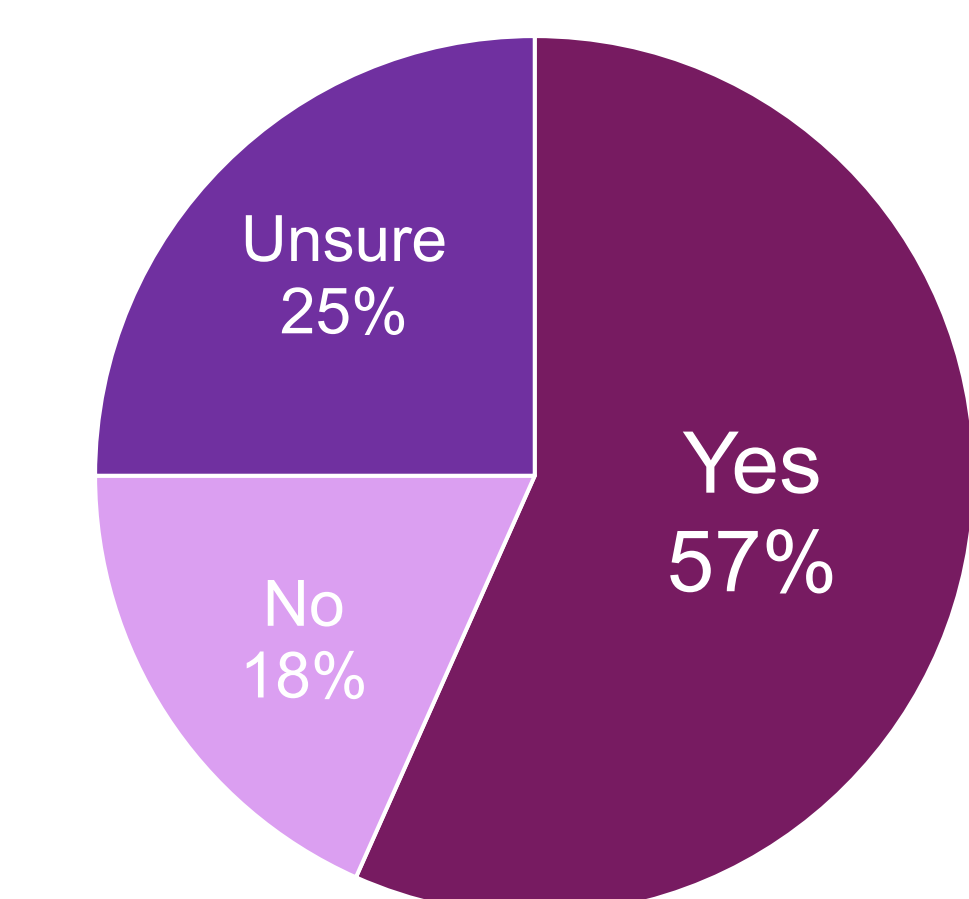


Figure 5. Usefulness of the JECS

	Basic Level	Advanced Level	Total
Useful	19	15	34
Not Useful or Unsure	7	19	26
	26	34	60

Table 1. Usefulness based on English Level. P=0.024

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