


A1110. Language

A. *What is your preferred language?*

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Enter Code

☐

B. *Do you need or want an interpreter to communicate with a doctor or health care staff?*

0. No
1. Yes
9. Unable to determine

Item Rationale

Health-related Quality of Life

- Inability to make needs known and to engage in social interaction because of a language barrier can be very frustrating and can lead to social isolation, depression, resident safety issues, and unmet needs.
- Language barriers can interfere with accurate assessment.

Planning for Care

- When a resident needs or wants interpreter services, the nursing home must ensure that an interpreter is available.
- An alternate method of communication also should be made available to help ensure that basic needs can be expressed at all times (e.g., communication board with pictures on it for the resident to point to, if able).
- Identifies residents who need interpreter services in order to answer interview items or participate in consent process.

Steps for Assessment

1. Ask for the resident's preferred language.
2. Ask the resident if they need or want an interpreter to communicate with a doctor or health care staff.
3. If the resident—even with the assistance of an interpreter—is unable to respond, a family member, significant other, and/or guardian/legally authorized representative should be asked.
4. If neither the resident nor a family member, significant other, nor guardian/legally authorized representative source is able to provide a response for this item, medical documentation may be used.
5. It is acceptable for a family member, significant other, and/or legally authorized representative to be the interpreter if the resident is comfortable with it and if the family member, significant other, and/or guardian/legally authorized representative will translate exactly what the resident says without providing their interpretation.

A1110: Language (cont.)



Coding Instructions for A1110A

- Enter the preferred language the resident primarily speaks or understands after interviewing the resident and family, significant other and/or guardian/legally authorized representative and/or reviewing the medical record.
- If the resident, family member, significant other, guardian/legally authorized representative and/or medical record documentation cannot or does not identify preferred language, enter a dash (—) in the first box. A dash indicates “no information.” CMS expects dash use to be a rare occurrence.

Coding Instructions for A1110B

- **Code 0, No:** if the resident (family, significant other, guardian/legally authorized representative or medical record) indicates there is no need or want of an interpreter to communicate with a doctor or health care staff.
- **Code 1, Yes:** if the resident (family, significant other, guardian/legally authorized representative or medical record) indicates the need or want of an interpreter to communicate with a doctor or health care staff. Ensure that preferred language is indicated.
- **Code 9, Unable to determine:** if the resident is unable or declines to respond or any available source (family, significant other, guardian/legally authorized representative or medical records) cannot or does not identify the need or want of an interpreter.

Coding Tips and Special Populations

- An organized system of signing such as American Sign Language (ASL) can be reported as the preferred language if the resident needs or wants to communicate in this manner.

