Imagine waking up in the ICU, on a ventilator, unable to speak. You don’t have your hearing aids in or your glasses on. Maybe you are one of the more than 25 million people in the United States who have limited English proficiency and all of your doctors and nurses are speaking only in English. You don’t understand why you are here and feel trapped in your own body.

The hospital can be a really frightening place during a time that is likely when you feel most vulnerable. When someone has difficulty communicating, they often feel alone and isolated as they are unable to express their basic needs/wants, ask questions, participate in their own care, make medical decisions, and connect with those around them.

Communication access in healthcare goes beyond ensuring the patient’s ability to participate in their care - this may be the last chance for a patient to connect with their loved ones, reminisce, get closure, and say goodbye.

Despite federal laws and patient care standards, many hospitals neglect to provide communication tools and strategies for all patients. Since the onset of the COVID-19 pandemic, there has been greater attention to supporting patients who have difficulty communicating and the legal/ethical responsibility healthcare providers have to ensure communication access.

As a speech-language pathologist (SLP) and Clinical Specialist in Patient-Provider Communication, I am spearheading hospital-wide initiatives to ensure that all patients have communication access. Providers have been educated and trained on communication tools and strategies to support bedside interactions and workflow processes have been put in place to identify patients who would benefit from more intensive intervention from an SLP.

Everyone has the potential to communicate and the right to communicate and rely on healthcare systems to support their abilities to communicate.

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