Supplemental Digital Appendix 1

Race, Ethnicity, and Language Data Collection Job Aid for Access Services Staff, Johns Hopkins Medicine

Race, Ethnicity, and Language (REaL) Data Collection Job Aid

Introduction Statement

Use this job aid to help you accurately capture the patient’s race, ethnicity, and preferred language.

RACE

- Defined by the federal government as a social definition of race recognized in the country.
- The federal government requires a minimum of five categories:
  1. American Indian or Alaska Native
  2. Asian
  3. Black or African American
  4. Native Hawaiian or Other Pacific Islander
  5. White
  6. Other
  7. Unknown
- People should self-identify the race(s) they consider themselves to be.

ETHNICITY

- Origin viewed as ancestry, nationality, lineage or country of birth of the person or person’s parents or ancestors before coming to America.
- Country of birth ≠ Nationality ≠ Ancestry
- The federal government requires a minimum of two categories:
  1. Hispanic or Latino
  2. Not Hispanic or Latino
- People who self-identify as Hispanic or Latino can identify with any race(s). For example, those who are considered Afro-Latino.

PREFERRED LANGUAGE

- The language (including sign language) most preferred by a person for communication.
- Individuals who may have a different preferred language other than English may not speak English as their primary language and/or may have limited English Proficiency (a limited ability to read, speak, write, or understand English). Limited English Proficiency includes people who are blind, deaf, hard of hearing, and have disabilities, limited vision, or low or no literacy.
- People should still report the language they want for healthcare. Research shows language barriers can lead to misdiagnosis, inappropriate treatment, and adverse events.

These are the questions you will be asking

- Race
  - How would you identify your race?
- Ethnicity
  - Do you consider yourself Hispanic or Latino?
- Preferred Language
  - What is your preferred language for medical discussions?

In partnership with JHU Patient Access
Johns Hopkins Medicine Office of Diversity and Inclusion

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Job Aid | March 2020

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Supplemental Digital Appendix 2

Literacy-Adapted COVID-19 Employee and Patient Infographic, Johns Hopkins Medicine

UNDERSTANDING COVID-19

A novel coronavirus has caused an outbreak of respiratory illness that the World Health Organization named COVID-19 in February 2020. The disease has led to millions of cases around the world.

![Symptoms of COVID-19]

SYMPTOMS OF COVID-19 INCLUDE

- HEADACHE
- COUGH
- SORE THROAT
- FEVER OR CHILLS
- SHORTNESS OF BREATH OR DIFFICULTY BREATHING
- NEW LOSS OF TASTE OR SMELL
- DIARRHEA
- MUSCLE OR BODY ACHES

In rare cases, it can lead to severe respiratory problems, kidney failure or death.

THE BEST WAY TO PROTECT YOURSELF

- HAND-WASHING: Frequently wash your hands with soap and water or use a hand sanitizer with at least 60% alcohol.
- WEAR A CLOTH FACE MASK: When in public to help prevent the spread of the virus.
- COUGH OR SNEEZE INTO A ELBOW OR BENT ARM: Throw the tissue in the trash.
- PHYSICAL DISTANCING: Stay 6 feet away from others.
- IF YOU FEEL SICK: Stay home and call your health care provider.
- DO NOT TOUCH YOUR FACE: Without washing your hands first.
- CLEAN AND DISINFECT: Frequently touched objects and surfaces.

WHEN TO SEEK MEDICAL ATTENTION

- Call 911 if you have an emergency.
- If you feel sick, stay home and call your medical provider.
- Call your health care provider if you have been near someone with COVID-19.

For more information, please visit hopkinsmedicine.org/coronavirus.