

Language Access and Patient Encounters

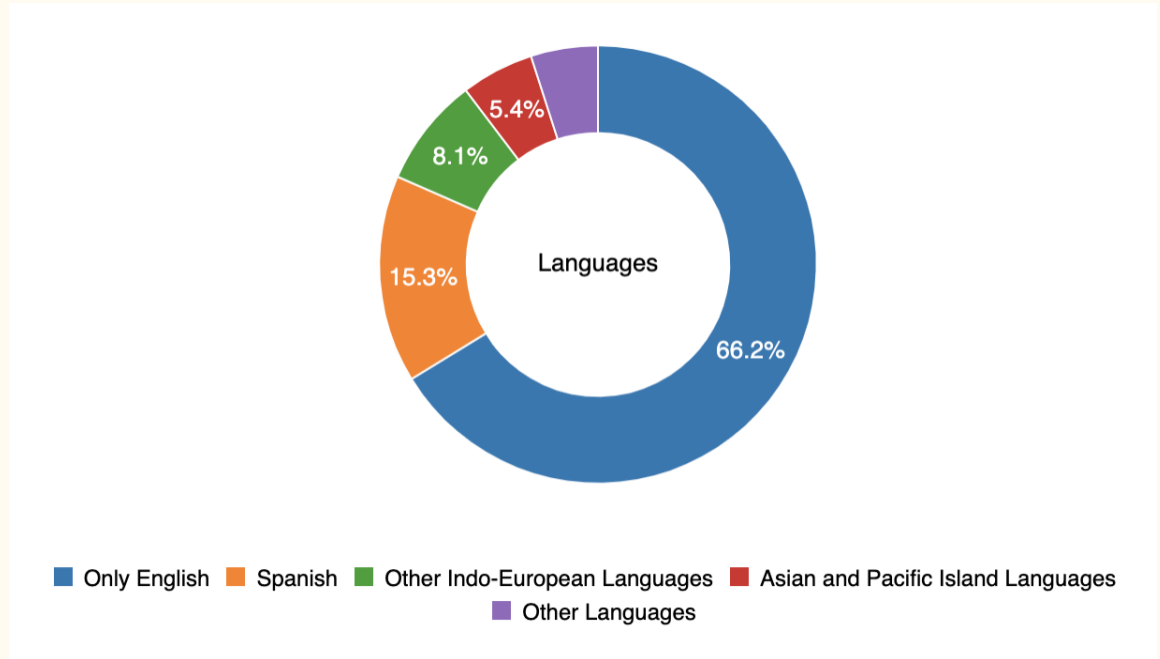
Khoi (Tony) Do, Rachel Duong, Megan Fernandez, Connie Ge, Leslie Panella, Shervin Rezaei

Our Population

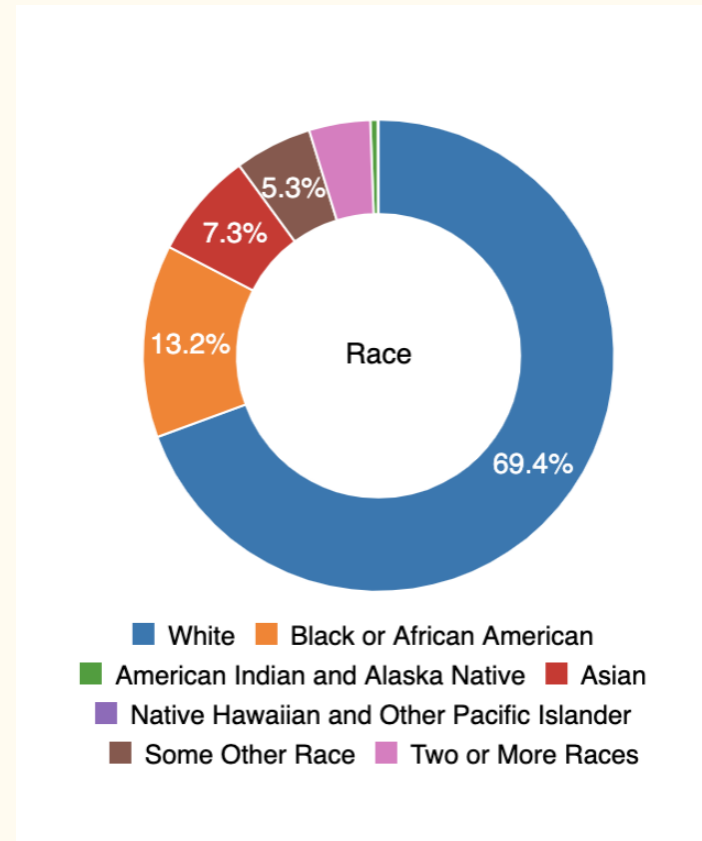
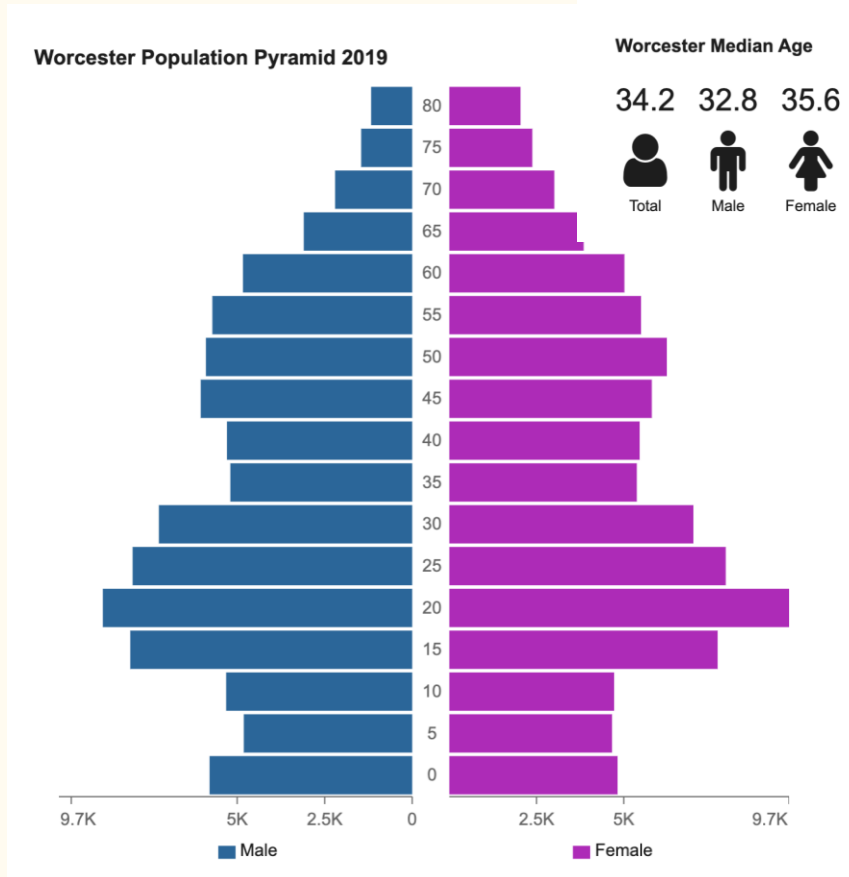


Languages of our Population

- Spanish*
- Portuguese*
- Vietnamese*
- Albanian*
- Nepali*
- Mandarin*
- Arabic*
- Russian
- Korean
- Cantonese
- & More

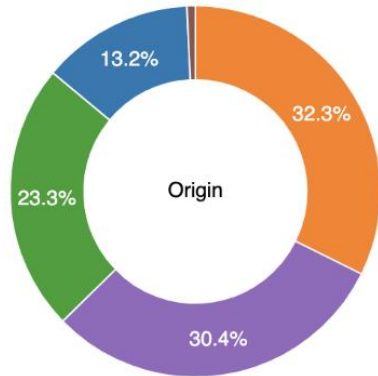


Age and Race Distributions of the Worcester Population



Worcester Residents by Birthplace

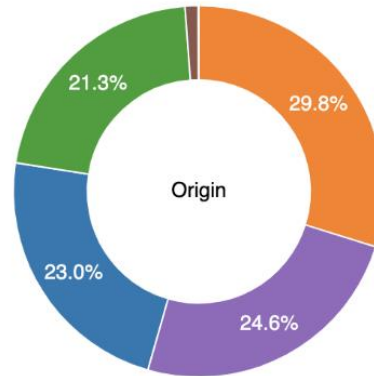
Origin of Non Citizens



Europe Asia Africa Oceania
Latin America North America

Non citizens include legal permanent residents (green card holders), international students, temporary workers, humanitarian migrants, and illegal immigrants.

Origin of Naturalized Citizens



Europe Asia Africa Oceania
Latin America North America

57.44% Born in Massachusetts ?

78.93% Native Born

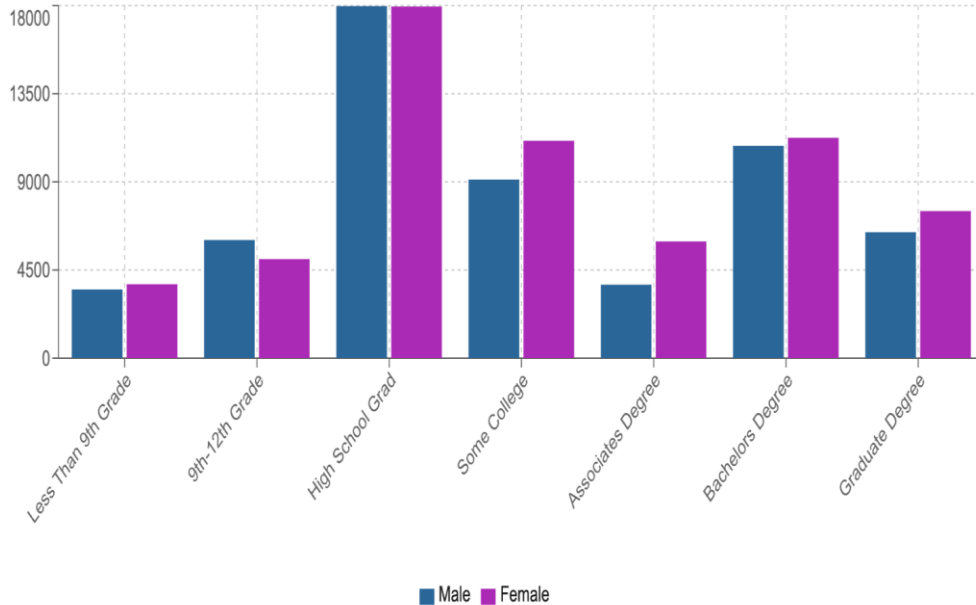
21.07% Foreign Born

11.24% Non Citizen

Place of Birth

78.93% of Worcester residents were born in the United States, with 57.44% having been born in Massachusetts. 11.24% of residents are not US citizens. Of those not born in the United States, the largest percentage are from Asia.

Education Attained



Education Attained	Count	Percentage
Less Than 9th Grade	7,283	6.05%
9th to 12th Grade	11,090	9.22%
High School Graduate	35,925	29.87%
Some College	20,225	16.81%
Associates Degree	9,717	8.08%
Bachelors Degree	22,101	18.37%
Graduate Degree	13,945	11.59%

The ASL community

- There are approximately 1 million deaf people in the US, and 10 million who are hard-of-hearing
- The Deaf community has their own language and culture
- There are a number of different ways of communicating with the deaf:
 - American Sign Language
 - English Sign Language
 - Rochester Method
 - Home Signs
- Two types of deaf interpreters:
 - American Sign Language (ASL)
 - Certified Deaf Interpreter (CDI)

Good Terms

- ✓ Deaf
- ✓ Hard-of-Hearing

Bad Terms

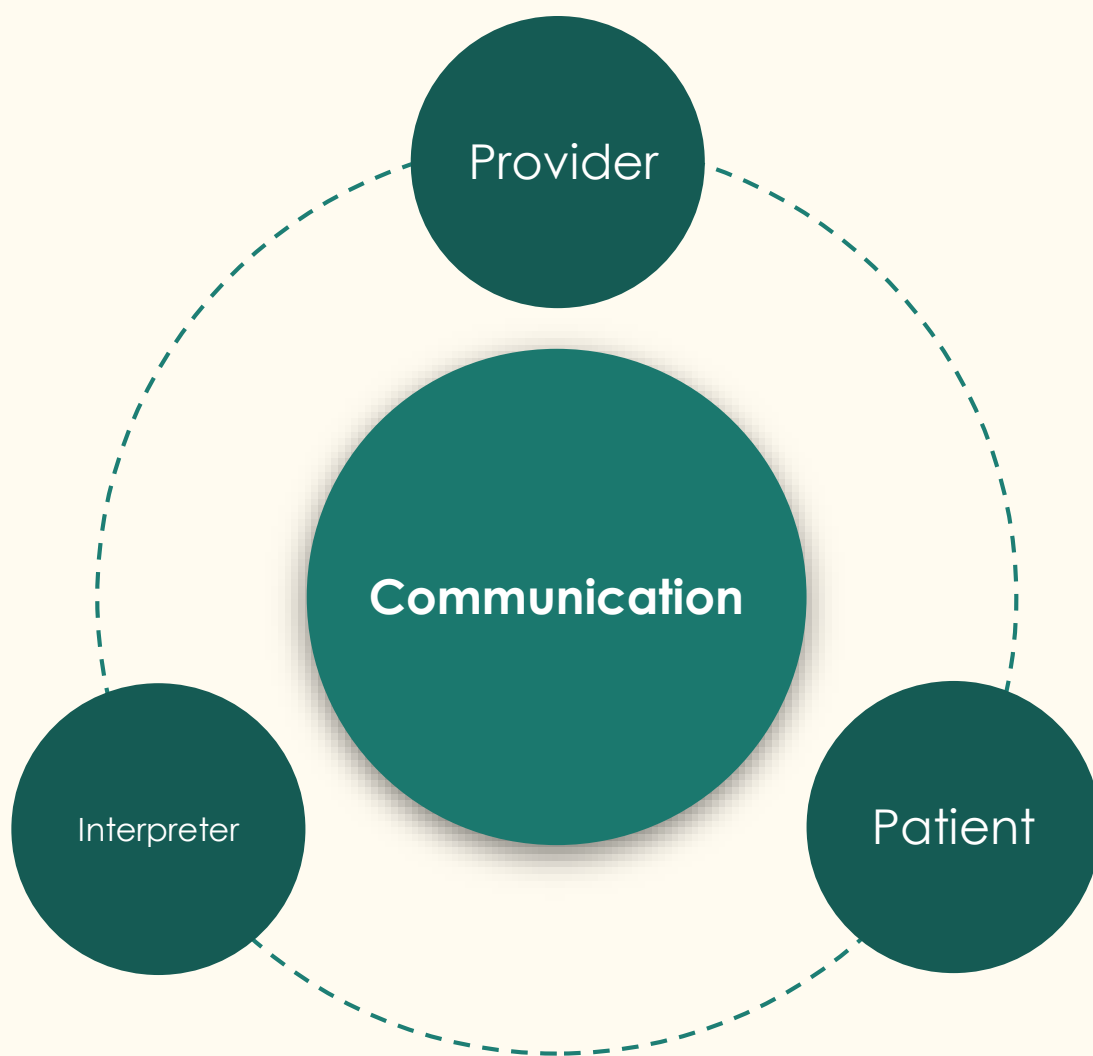
- ☐ Deaf-mute
- ☐ hearing-impaired

Medical/Social/Structural Issues

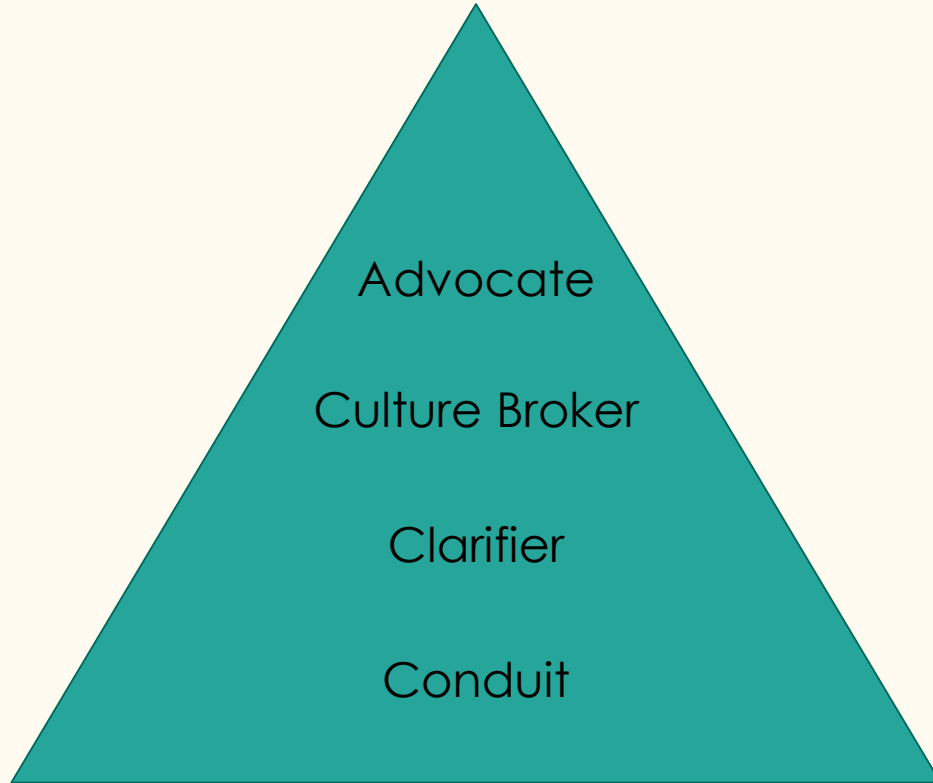
- Misinterpretation leading to medical consequences
- Lack of social/external resources which are language accessible
- Transportation access

Our Team





What are the roles of an interpreter?



How do you become an interpreter?

- Certification process
 - 40 hour training (minimum to receive a Certificate of Completion from a qualified medical interpreter training course)
 - CCHI or CMI
 - Written and oral exams
- Minimum 18 years old
- GED*
- Oral proficiency in English and target language

Population Health Advocacy



Language Access Advocacy - Local

- UMass Memorial Medical Center 1557 Non-Discrimination Notice
 - Affirms UMass medical campuses' commitment to non-discrimination on the basis of race, color, religion etc.
 - Further affirms full provision of qualified interpreter services and materials/resources for non-English speaking patients and patients with speaking and/or hearing disabilities

- 30-Day Readmission Limited English Proficiency (LEP) Patients
Congestive Heart Failure: Pilot intervention
 - This is a UMass-led initiative, implemented on October 4, 2018, that addresses the issue that LEP patients admitted for heart failure have a higher 30-day readmission rate vs English speaking patients.
 - The program integrates a hospital interpreter with the CHF team to address communication barriers and cultural differences affecting LEP patients during their hospitalization.

Language Access Advocacy - State

- Massachusetts ER Bill (Chapter 66 of the Acts of 2000, the Emergency Room Interpreters Law or ERIL)
 - Regulated by Department of Public Health
 - Acute psychiatric care facilities + ERs
 - Provide competent interpreter services at no cost to all non-English speaking patients who seek emergency care or treatment, 24/7
- Massachusetts Commission for the Deaf and Hard-of-Hearing (MCDHH)
 - “Provides accessible communication, education and advocacy to consumers and private and public entities so that programs, services and opportunities throughout MA are accessible to persons deaf and/or hard of hearing
 - Statewide Interpreter and Communication Access Realtime Translation (CART) services

National Board of Certification for Medical Interpreters



- Consolidation under one nationally recognized certification entity that ensures medical interpreters are appropriately trained to foster improved health outcomes, patient safety, patient/provider communication
- Certification for Medical Interpretation (CMI)
 - Medical Interpreter Education required (40 hours)
 - Proof of proficiency in English and target language (TOEFL, educational degrees etc.)
 - Written and Oral Exam for certification

How can we advocate for patients with language barriers?

As doctors, it is our responsibility to establish health information understanding and engagement between provider and patient to promote effective application/adherence to treatment plans

For patients with language barriers, we must first **confirm which language/mode of communication they prefer**

Then, utilize available resources to accommodate (interpreter's services, translated printed material etc.)

How can we advocate for patients with language barriers?

If resources are lacking, consider rectifying the shortcoming (i.e. PPD)

When pursuing such, maintain 4 aspects of health literacy:

- **Fundamental** - reading, writing, numeracy
- **Scientific** - general vocabulary of lay person vs. medical professional
- **Civic** - insurance, healthcare operations, team roles
- **Culture** - familiarity with allopathic medicine and concepts such as patient autonomy, preventative care etc.

Service & Experiential Learning



What did we do?



- Mornings
 - Lectures on varied topics such as Health Literacy, Advocacy, Refugee and Immigrant Populations in Worcester, How to interact with an interpreter, ASL
- Afternoons
 - Shadowed Medical Interpreters at UMass Campuses
 - Hahnemann
 - Memorial
 - University
 - Edward M. Kennedy Health Center

How to use an Interpreter Effectively

- Pre-session with interpreter - set expectations, provide context
 - If using an unprofessional interpreter (family member, friend), ask that the conversation be translated word-for-word
 - Alternatively, use a phone interpreter, especially when giving instructions
- Address the patient directly as you would address an English-speaking patient (avoid the 3rd person)
 - Make direct eye contact with the patient. You can interpret body language!
- Offer the interpreter a chair if one is available so everyone is on the same level
- Break-up ideas into short, discrete sentences
- Pause: wait until the interpreter has finished translating
 - Some concepts/words do not have direct translations and require further explanation

What to Avoid When Working with an Interpreter

- Talking to the interpreter instead of the patient
- Asking the interpreter to spend time with the patient when you are not there
- Speaking for too long without letting them interpret
- Using medical jargon
- Jokes, especially related to culture
- Idioms and slang
- Casual conversation with the interpreter in front of the patient
- Depending on the interpreter to lead and direct the interview
- Leaving the patient out of the conversation for too long

Needs of the Community

- Identification: students who volunteer at Free Clinics in the community noted the dearth of translated documents that are frequently distributed to non-English speaking patients
 - Intake form
 - Screening tool
 - PPD follow-up
 - Consent forms
- Service Project: prepare Free Clinic forms translated into Spanish and Portuguese
- Live interpretation vs phone vs remote video

Acknowledgements

We would like to thank Lisa Morris for her guidance and instruction throughout the clerkship.

Thank you to Max Grecchi, Oscar Arocha-Pietri and the coordination team for accommodating us at both UMass and Edward M. Kennedy.

Thank you to all the interpreters for welcoming us and sharing your perspective and experiences.