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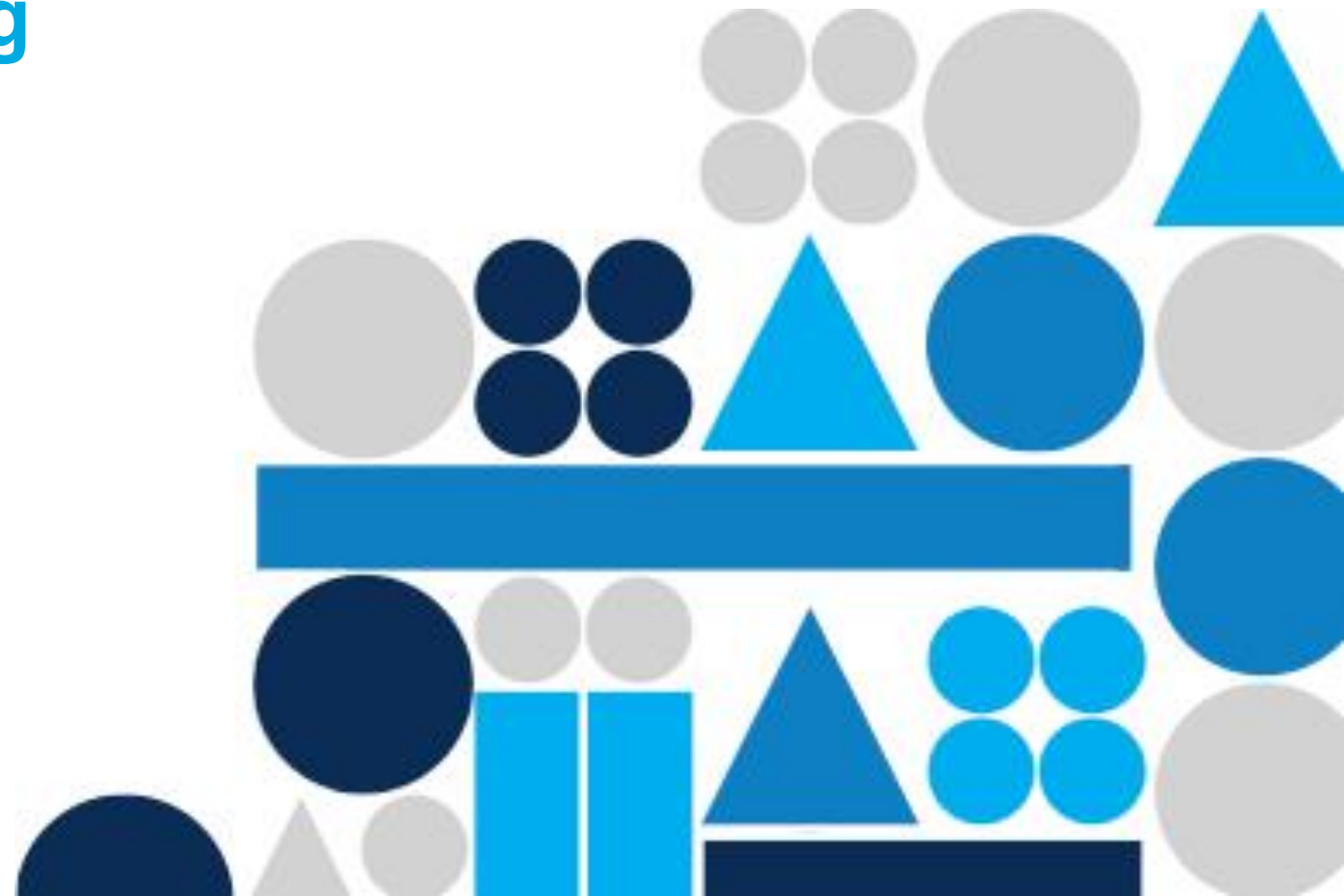
Language Access as a Barrier to Health Literacy: Strategies for Leveraging Interpreter Services in Hospitals and Clinics

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Department of Pediatrics
SCHOOL OF MEDICINE
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Introduction Questions

1

How would you
define Health
Literacy?

2

How do you
create health
literacy when
someone also
has Limited
English
Proficiency
(LEP)?

3

Does LEP always
require Health
Literacy support?



Patient Case Study

9-year-old patient with liver disease requiring a liver transplant. Patient was on transplant list and would be requiring a long list of medications and education. MOC was Spanish-speaking only and illiterate. Interpreter services had been involved from beginning of care. Before, during, and after transplant admission, MOC would be receiving education on day-to-day care and administering of medications at home to avoid rejection.

1

Establish important partnership between Interpreter services, Health Literacy, Nursing Staff, and Pharmacy

2

Health Literacy helped with:

- A medication calendar with number to count through days
- Pictures for time of day
- Picture-based content for how to use NG tube

3

Interpreter services helped:

- Interpret for teach-back methods and evaluate understanding of skills and concepts
- Cultural brokering and advocacy



What is language access?

All individuals with limited English proficiency (LEP) and other communication needs have the right to receive medical information and programs in their preferred language free of charge.



It's the LAW

- Title VI of the Civil Rights Act of 1964
- National Standards for Linguistically Appropriate Cultural Services
- Affordable Healthcare Act 1557
- Americans with Disabilities Act
- The Joint Commission

Title VI: "Is a national law that protects people from discrimination based on their race, color, or national origin, in programs or activities that receive Federal financial assistance."



The Medical Interpreter

The primary function of the medical interpreter is to make communication possible between a healthcare provider and a patient who do not speak the same language¹.



1. IMIA Medical Interpreting Standards of Practice, 1995

Discussion Question

1

Has anyone here worked with a professional interpreter? If not, how do you communicate with someone who is LEP?

2

What have you noticed or learned from that profession? E.g. how do they help you complete your work?

3

What is translation; is a translator different than an interpreter?





Ad Hoc “Interpreters”

WHO are Ad Hoc Interpreters?

Relatives, friends, hospital employees, minors

They may:

- Omit information *intentionally or unintentionally* that could cause pain or emotional distress
- Provide unsolicited advice
- Manipulate the conversation to their advantage
- Emotional burden and trauma
- Lack knowledge of medical terminology
- Cannot guarantee confidentiality
- Provider may be left out of conversation and lose control of interview
- No training in interpreting skills

“Ensure the competence of the people offering language assistance, recognizing that the use of untrained people or minors as interpreters should be avoided.”

-National CLAS Standards



Discussion Question

1

What systems are in place where you work to identify if a patient needs an interpreter?

2

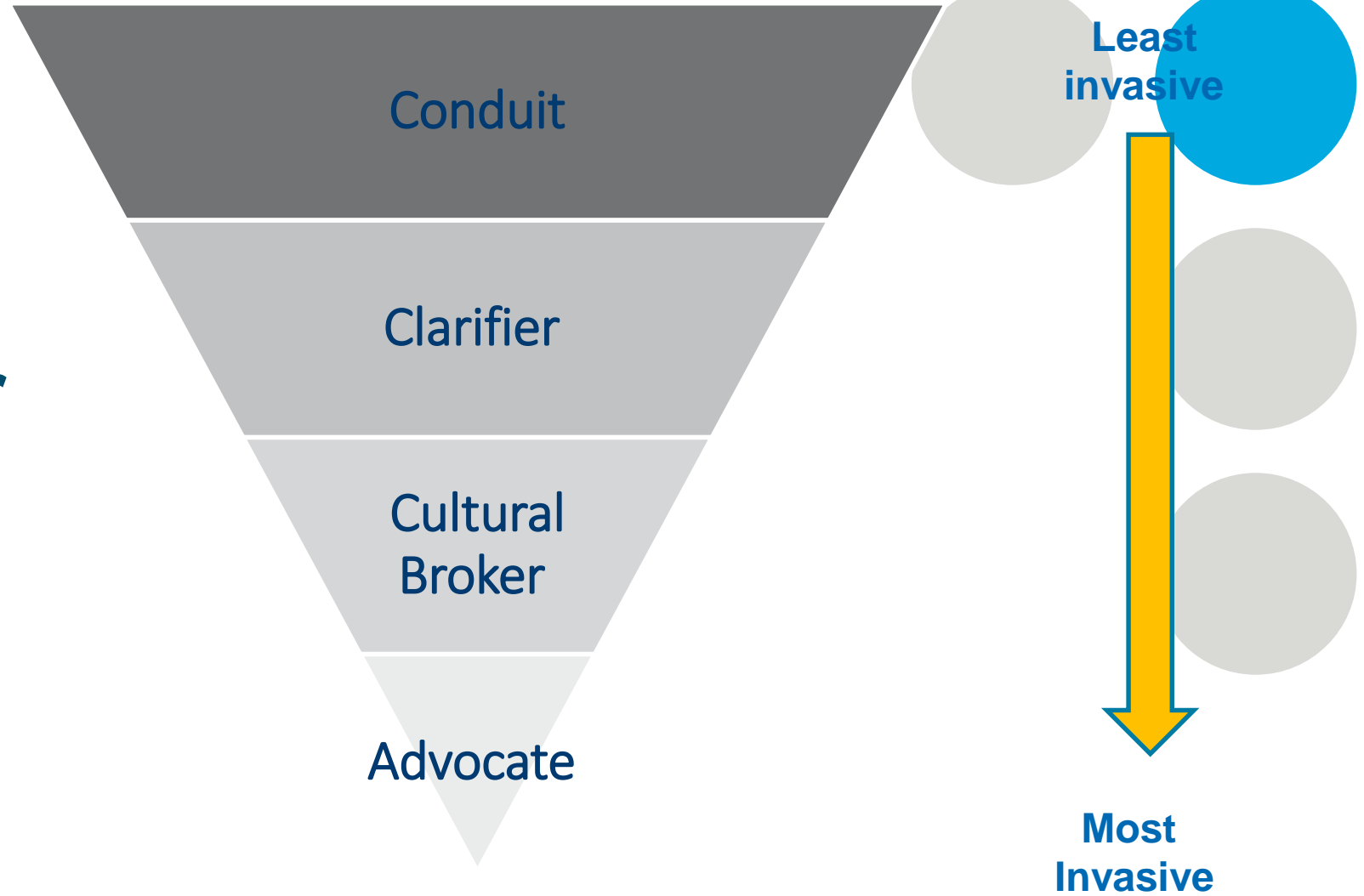
Do you have access to an interpreter? If not, how do you help the client/patient?

3

Have you used AI, like google translate?



Roles of the Interpreter



Interpretation Modalities



**Staff Spanish
In-person Interpreters**



**Video Remote
Interpreter
(VRI)**



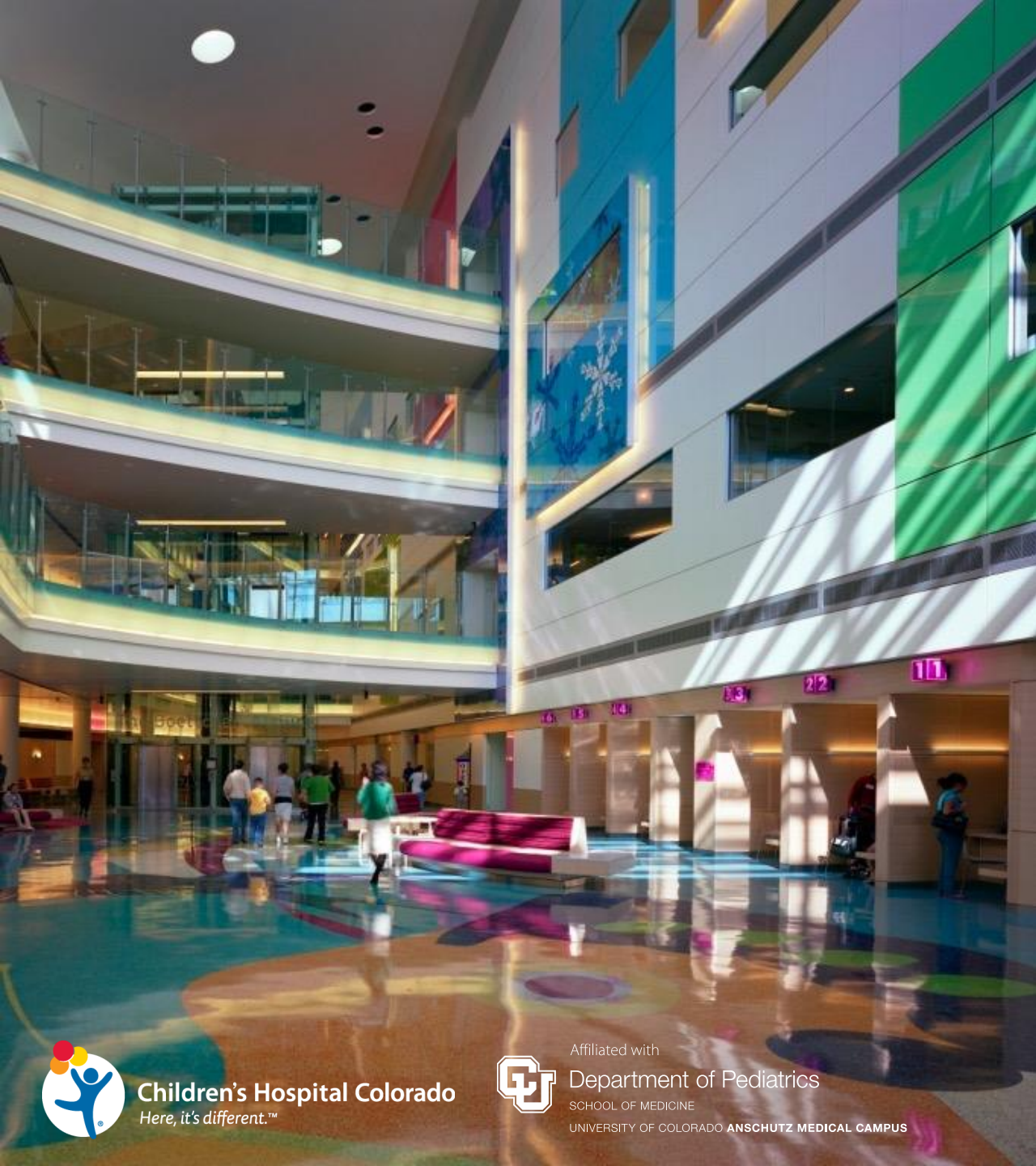
**Over-the-Telephone
Interpreters**



**Agency In-person
Interpreters for ASL &
other languages**



**Video-conferencing
Interpreters**



Barriers and Challenges

- What are some challenges you've encountered while working with each of these modalities?
- What are some barriers to getting access to language services?



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Activity 1

How to work with an interpreter:

1

Know your institution's in-person interpreter resources and request process

2

Brief the interpreter before entering the room

3

Physical placement of patient, family, interpreter, and care team matters!

4

Commit to an introduction/p re-session with the interpreter, family, and teams.

5

Speak directly to the patient and family in the first person.

Continued...

6

Slow down and pause for interpretation.

7

Expect the interpreter to ask for clarification.

8

Be mindful of using jokes, idioms, cultural references.

9

Use teach-back when necessary to check for understanding.

10

Document the name of interpreter or interpretation modality in patient chart.

Activity 2

Interpreting Exercise



Interpreting Exercise

You will need to take this new seizure medication called Keppra. I will send in the prescription to get filled and you need to pick it up at your pharmacy. We will start you on a low dose and you will slowly be increasing the dose throughout the course of a few weeks until we get you to the right dose for your weight. If for any reason you get side-effects that are too concerning, please don't hesitate to call me.

This is the table for dosing instructions:

- Take $\frac{1}{2}$ tablet once in the morning each day the 1st week.
- You will then take $\frac{1}{2}$ tablet in the morning and $\frac{1}{2}$ half in the evening each day the 2nd week.
- The 3rd week, take 1 tablet in the morning and $\frac{1}{2}$ in the evening each day.
- On the 4th week, you will take 1 tablet in the morning and 1 in the evening every day. You will stay at this dose until your follow up appointment in 3 months.



Discussion Question

What have you seen work well in caring for patients and families with a preferred language other than English?

What has been challenging?



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Discussion Question

What are achievable strategies to integrate in-person interpreters into important aspects of patient care?

How do you create a culture of doing the right thing?



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How can organizations create health literacy through language access?

- Identify & translate vital documents
- Create a system for identifying preferred language (*Hispanic doesn't = Spanish*)
- Health Literacy beyond the text (*interpreters more than conduits*)
- Provide access via on-demand interpretation
- Identify when it is permitted to use AI
- When do you prioritize in-person interpretation
- Staff Recruiting
- Health Literacy for languages of lesser diffusion



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Thank You

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