

Leveraging Language Services to Deliver the Best Care for All Patients

Health Equity

Date Posted:

Nov 05, 2018

In recent years, we've seen an influx in the number of stories documenting horrible medical situations that have taken place because physicians and patients weren't able to understand each other's languages.

Maybe you've heard of the \$71 million malpractice settlement that resulted from a mistranslation of the word intoxicado (poisoned); the confusion around this single word left a young man quadriplegic. Or the physician who misunderstood the mother of a two-year-old and diagnosed an injury from a tricycle accident as child abuse, which led to the mother signing away custody of her two children. Or there's the more recent case of the six-month-old brought to an emergency department with vomiting and diarrhea. The baby's 12-year-old sister was asked to interpret for her mother, but physicians misdiagnosed the baby and discharged her with instructions in English. The family returned three days later and were admitted, but the child died later that day of septic shock.

All tragic. All avoidable. All resulting from the lack of appropriate language access.

Nine percent of the U.S. population, or 25.1 million people, self-rate their ability to speak English as less than "very well." Research has shown that <u>language barriers lead to significantly greater odds of</u>: a longer hospital stay, a serious medical event occurring during a hospitalization, asthmatic children requiring intubation in the ICU and accidental drug overdoses.

So what is being done about it? We are proud to say that Children's Hospital of Philadelphia (CHOP) has been a leader in addressing some of the barriers many pediatric institutions face when it comes to language access.

The numbers speak for themselves. According to Gabriela Jenicek, director of <u>Language Services at CHOP</u>, patient encounters involving an interpreter (face-to-face or over-the-phone) have risen rapidly from 59,000 just five years ago to over 110,000 in FY 2018. CHOP currently employs almost 30 full-time interpreters who all together cover five of the 80+ languages requested annually. The scheduling office receives interpreter requests from across the network, servicing those requests with both CHOP staff and interpreters from external agencies.

Although Language Services makes every effort to provide a face-to-face interpreter for each request, it is not always possible to have an interpreter in the room for each appointment. While not optimal, telephonic interpreters fill in the gaps. These telephonic interpreters fulfill many needs our patients face, ranging from ordering dinner to delivering simple messages to registering a patient in clinic. To the delight of many, video remote interpreting (VRI) is now also an option when a face-to-face interpreter is not available. With the touch of a screen, clinicians are connected with an interpreter they can see and hear on a movable video unit. Though video remote interpreting has its limitations, it represents a big step forward in ensuring better care, engagement and improved outcomes for CHOP patients and families with limited English proficiency.

CHOP has also further sought to chip away at language barriers with the launch of the CHOP Speaks Your Language telephonic service for patient families. In the past, when families had a question for their provider or needed to schedule an appointment, they were told to leave a voice message and then someone from the hospital would call them back with an interpreter. This phone tag procedure had its cracks, to say the least. The

newly expanded CHOP Speaks Your Language service allows patient families who use any one of nine different languages to call a single number and then select their language from the telephone menu to be connected with an interpreter who can complete their call at no charge to them, without having to wait for a return call.

CHOP is a regional leader in language access, but certainly we still have a long way to go. Who among staff has not been guilty of nodding our head a little harder, smiling a little wider and saying "Ok? Yes? You understand, right?!" all with the sneaking suspicion that the family isn't quite sure what was just said. We have rationalized, "It was the end of my shift." "It wasn't really that important." "I gave them a thumbs up and they understood." "It would have taken too long." Yes, it does take a little longer. And it is a little inconvenient—but it will always be worth it. For the reputation of this institution, our service standards, and our dedication to treating every child that walks through our doors with the same care, respect and understanding they deserve, we pick up that phone and we call Language Services. We get an interpreter in the room, on the line or on the screen, and we give people the opportunity to express themselves in their native tongue. Because that's what we would want. And that's what every one of our kids deserves.

We all know that when a child is sick, parents can feel immensely stressed. Adding language differences to the mix only makes the burden that much more difficult. Interpretation and translation services are absolutely vital to ensure that every child who walks through our front doors—no matter where they come from or what language they speak—has the same opportunity to achieve optimal health and well-being. We hope language services programs like this can be a model for organizations around the country who have the same moral imperative.

Additional resources:

https://www.youtube.com/watch?v=twlNuqacDdY

https://www.youtube.com/watch?v=Yi90RMo-QkY

Priscilla Ortiz, PhD, is Program Manager of Language Services and John Neiswander, CMI is an Access Coordinator in Global Patient Services. Both of have earned national medical interpreter certification in Spanish.

Priscilla Ortiz, PhD

John Neiswander, CMI