



CONNECTING CULTURES

Our Language is Health Care

TOP 10 REASONS WHY I DON'T NEED AN INTERPRETER: EXPOSING THE MYTHS

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TOP 10 REASONS WHY I DON'T NEED AN INTERPRETER: EXPOSING THE MYTHS



Overview

- Review common oversights made by health care professionals when working with diverse populations
- Understand how language services support patient safety, patient confidentiality, and child welfare.

TOP 10 REASONS WHY I DON'T NEED AN INTERPRETER: EXPOSING THE MYTHS



Agenda

- Language access myth overview
- Discuss how each myth can affect patient outcomes
- Establish action plans and tools for attendees to take back to their practice
- Question and Answer

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TOP 10 REASONS WHY I DON'T NEED AN INTERPRETER: EXPOSING THE MYTHS



Top 10 Reasons Why I Don't Need An Interpreter

10. My patient speaks enough English to get by.
9. We've always done just fine without an interpreter.
8. I studied Spanish in college and have brushed up on my skills with my patients. I think we do pretty well.

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TOP 10 REASONS WHY I DON'T NEED AN INTERPRETER: EXPOSING THE MYTHS



Top 10 Reasons Why I Don't Need An Interpreter

7. My patient always comes with a friend who speaks English and she (my patient) feels pretty comfortable with that.

6. My patient doesn't want an interpreter. She feels comfortable with her husband and I speaking with one another.

TOP 10 REASONS WHY I DON'T NEED AN INTERPRETER: EXPOSING THE MYTHS



Top 10 Reasons Why I Don't Need An Interpreter

5. My patient (a minor) speaks English.
4. My patient's son (a minor) always accompanies my patient. The son and I understand each other very well.

TOP 10 REASONS WHY I DON'T NEED AN INTERPRETER: EXPOSING THE MYTHS



Top 10 Reasons Why I Don't Need An Interpreter

3. Interpreters always take too long to get here.
2. Interpreters make the appointments last too long.

TOP 10 REASONS WHY I DON'T NEED AN INTERPRETER: EXPOSING THE MYTHS



Top 10 Reasons Why I Don't Need An Interpreter

1. Interpreters cost too much!

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Patient Safety

10. My patient speaks enough english to get by.

- What measures are being taken to minimize the risk of a misdiagnosis?
- Will the provider and patient develop and maintain a trusting relationship? If so, how?

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Patient Safety

9. We've always done just fine without an interpreter.

- Is the patient empowered to make informed decisions about their health or that of a minor?
- Is the provider empowered to make informed treatment decision for their patient?

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Patient Safety

8. I studied Spanish in college and have brushed up on my skills with my patients. I think we do pretty well.

- What assurances are there that the patient and provider have effectively and accurately communicated with each other?

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Patient Safety

When an organization provides effective language assistance, individuals are better able to:

- Ask Questions
- Explain Symptoms
- Understand Instructions
- Provide Informed Consent

AMA: An Ethical Force Program Consensus Report (2006)

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Patient Safety

When an organization provides effective language assistance, individuals are better able to:

- Visit physicians for preventative care
- Fill prescriptions
- Adhere to treatment regimes
- Have their confidentiality protected

AMA: An Ethical Force Program Consensus Report (2006)

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Patient Confidentiality

7. *My patient always comes with a friend who speaks English.*

- Has the patient been offered the services of a professional interpreter?
- How might this decision become a potential HIPAA violation?
- How might the use of a friend affect treatment outcomes?

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Patient Confidentiality

6. My patient doesn't want an interpreter. She feels comfortable with her husband and me speaking with one another.

- What communication barriers exist in this scenario?
- Is clear communication between patient and provider possible?

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Patient Confidentiality

Question: Why can't I use a family member or friend?

Negative outcomes of having these 'stand-in' interpreters include omission of information, improperly interpreted concepts and editorialized information.

AMA: An Ethical Force Program Consensus Report (2006)

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Child Welfare

5. *My patient (a minor) speaks English.*

- Would a provider examine and treat and English speaking minor without the knowledge or informed consent of a parent? Would a provider expect this child to explain treatment plans to the parent?
- How does using a minor disrupt the parent/child relationship?

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Child Welfare

4. My patient's son (a minor) always accompanies my patient to his visits. The son and I understand each other very well.

- What communication barriers exist in this scenario?
- What degree of understanding does a minor have of health care, basic or complex?

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Child Welfare

Hospitals should implement policies that do not permit the use of family members, particularly minors, for interpreting during medical encounters, except in the case of an emergency when no other option is available.

The Joint Commission "Hospitals, language and culture: A snapshot of the nation"

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Child Welfare

- Parents' children should not be used as translators.
- In some cultures, it is improper for children to take on a role of responsibility for their parents.
- There may also be questions asked and information disclosed (during the interview) that are not appropriate for children to hear.

Family and Cultural Issues in a School Swallowing and Feeding Program, Ellis Davis-McFarland (2007)

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Child Welfare

Minor children should never be used as interpreters, nor be allowed to interpret for their parents when they are the patients/consumers.

Office of Minority Health CLAS Mandate 6

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Interpreter Services

3. Interpreters take too long to get here.

- In what situations is it critical to obtain accurate and complete information from your patient?
- In what circumstances does speed trump quality?

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Interpreter Services

Nonprofessional hospital employees are also a common source of "translation".

Their knowledge of the English language is often limited...and they too will be assaulted emotionally with confidential and difficult information.

National Guideline Clearinghouse: Communicating with children and families: from everyday interactions to skill in conveying distressing information. www.guideline.gov

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Interpreter Services

There is rarely a debriefing opportunity for these kinds of volunteers in the aftermath of the discussion.

Use of untrained translators is, therefore also, an unacceptable option.

National Guideline Clearinghouse: Communicating with children and families: from everyday interactions to skill in conveying distressing information. www.guideline.gov

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Interpreter Services

A qualified interpreter is an individual who has been assessed for professional skills, demonstrates a high level of proficiency in at least two languages and has the appropriate training and experience to interpret with skill and accuracy while adhering to the national *Code of Ethics and Standards of Practice* published by the National Council on Interpreting in Health Care.

The Joint Commission "Hospitals, language and culture: A snapshot of the nation"

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Interpreter Services

2. Interpreters make the appointments last too long.

- What skills and training have you observed from interpreters in the past? Can you note any distinctions between them?
- How do you determine if sufficient time was given to ensure your patient received excellent care?

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Interpreter Services

Some clinicians worry that using interpreters make patient encounters longer than if they do not use interpreters.

In most cases, the encounters without interpreters are shorter because less information is exchanged.

An organization should train clinicians on the clinical value of using trained, qualified interpreters and the clinical and legal risks of not using them when needed.

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Interpreter Services

1. *Interpreters Cost Too Much!*

- Is effective communication between provider and patient as valuable as other aspects of treating patients?
- What additional costs may be incurred if the language access process is not utilized properly?

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Interpreter Services

The Joint Commission clearly states what traits define a qualified interpreter:

- professional skills
- a high level of language proficiency
- appropriate training and experience

How can a healthcare organization assure these measures of quality?

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Interpreter Services

Until certification becomes more common, an organization should work with well established consulting, training, interpreting and translating associations and companies to find interpreters that have completed recognized training and to customize language assistance strategies.

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Review

- Think of one thing you've learned today that you didn't know before. Can anyone share their answer?
- What value do language services bring to your practice?
- Can language services improve patient outcomes? How?
- What resources would you like to have made available to you?

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Professionalism - Communication - Education - Integrity

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